## JERSEY STATE MEMORIAL PARK

13 CONOVER ROAD, MILLSTONE, NJ 08535

PHONE: (732) 649-6333

## **OFFICE & MAILING ADDRESS**

4105 US-1 SUITE-2 MONMOUTH JUNCTION NJ 08852

## **APPLICATION FOR MONUMENT APPROVAL**

I/we hereby request for approval of the enclosed application showing measurements and lettering on the headstone and/or the ledger. I am aware of and agree to abide by Jersey State Memorial Park's rules and regulations concerning installation of the monuments. I understand that those rules and regulations may be amended from time to time and agree to abide by such amendments.

NAME OF THE	DECEASED:			
DATE OF INTE	KMEN1:			
GRAVE LOCAT	ΓΙΟΝ:			
		Section	Grave No.	
PHONE CONTA	ACT NO:			
EMAIL :				
I Acknowledges	and Agrees for Fol	lowing:		
		llowed for headstones and le	edgers are:	
a.	28 inches wide;			
b.	36 inches high fro	m the ground;		
с.	80 inches long			
d.	Ledgers must be u	p to 6 inches high from the	ground.	
e.	Foundation Must l	e Reinforced Concrete-(Des	gn Mix Minimum 3000 PSI)	

- f. Only Pre-Mix Concrete Allowed. (No Mixing at Site)
- g. Jersey State Memorial Park is not responsible for Foundation

I am enclosing a copy of the formal drawing showing measurements and the lettering on the monument.

Sincerely,

Signatures

(Relationship to the Deceased)

Name

Address: