

Stowe Cemetery Commission Meeting

Tuesday, September 17, 2024

A meeting of the Stowe Cemetery Commission will be held Tuesday, September 17, 2024 at 8:30 am via a hybrid/Zoom meeting.

Join meeting: <https://us02web.zoom.us/j/88296115656>
Dial by your location +1 646 876 9923 US (New York)
Meeting ID: 882 9611 5656

8:30 am Superintendent's Report
Minutes, correspondence, work orders
Treasurer's Report
Remembrance Program Report
Discussion with staff regarding office protocols for Sale of Burial Rights;
communication policies with Parks Department regarding interments and
contractor deliveries
Superintendent's Report
Discussion of Memorial Wall project and budget process

Old or new business brought to the Commission

Stowe Cemetery Commission
Tuesday, August 20, 2024
Approved _____

A meeting of the Stowe Cemetery Commission was held Tuesday, August 20, 2024 at 8:30 am via a hybrid/Zoom.

Members present: Donna Adams, Claire “Skeeter” Austin, Gail Kaiser, Nancy LaVanway, Judy Smith, Christine Kaiser (alternate), Janet Godin

Others present: Kenny Hamblet, Elizabeth Teffner, Alison Kaiser, Peter Austin

Minutes

Minutes of July 16, 2024 were approved with minor changes on a motion by Nancy, seconded by Janet.

Donna recognized Kenny Hamblet who was in attendance. Mr. Hamblet had questions regarding the process to repair headstones that had been tipped over. Donna explained that the contractor is aware of this stone and a list of others. She said that this and other repairs will be taken care of in the near future. There was also discussion regarding what contact information is on file with the Town. Donna explained in some cases there may be second and third generation contact information but there is no formal data base. Mr. Hamblet also asked about Veterans Markers and the process of adding one of his family members. Donna said the American Legion will be made aware of this for next season and asked Mr. Hamblet to leave all of his current contact information with the Town Clerk’s Office. Mr. Hamblet thanked the Commission for their time.

Work Orders

Frank and Hattie Touchette – Sec 11 Lot 71/2 – request for cleaning – after a general discussion of how work orders should be processed, the WO was approved with a condition for Donna to check on the corner markers. Motion made by Nancy, seconded by Janet.

Fred Tatro – Sec 9 Lot 14 – flush marker request – on a motion by Nancy, seconded by Janet, the WO was approved with installation to be done by the Parks Department.

Request for secondary access to Riverbank

The Commission discussed the draft memo to the Selectboard requesting they once again take up review of a secondary access to Riverbank. Since the recent flooding, the bridge is closed and the Town has once again had to rely on permission for temporary access to Riverbank. There was consensus of the Commission to move forward with the memo to the Selectboard and also

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Jmg.

STOWE CEMETERY COMMISSION

P.O. BOX 730, STOWE, VT 05672

Phone (802) 253-6133

Email: cemetery@stowevt.gov

Fax (802)253-6137

WORK ORDER PERMIT

Original Burial Rights (DEED) Holder (PRINT) Fred Sears

Cemetery Name West Branch Section 1 Lot No. 14

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials and must be ordered and installed by the Town of Stowe.

Corner Markers are in place? YES or NO ? Corner Markers are needed? YES or NO

REQUEST FOR INSCRIPTION: Date/name can be approved by staff during regular business hours. Any other request must be approved by the Cemetery Commission. Include information in the space below.

REQUEST FOR CLEANING:
Composition of the memorial _____ Cleaning methos/agents _____

Maximum Size of Memorials, Stowe Cemeteries with lot size 4' x 12'

	Max Width 60 % of Lot	Max Face 20 % of Lot Including Base	Max Height Including Base
1 Lot	2.4 ft.	9.6 sq. ft	4 ft.
2 Lots	4.8 ft.	19.2 sq. ft	4 ft.
3 Lots	7.2 ft.	28.8 sq. ft.	4 ft.
4 Lots	9.6 ft.	38.4 sq. ft.	4 ft.

REQUEST TO INSTALL: Refer to Memorial and Foundation Specifications pages of the Stowe Cemeteries Rules and Regulations, May 2022 for allowed sizes and locations.

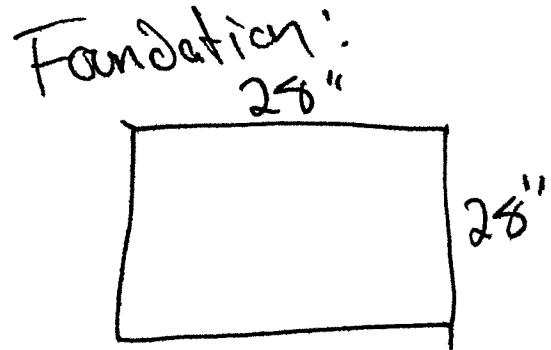
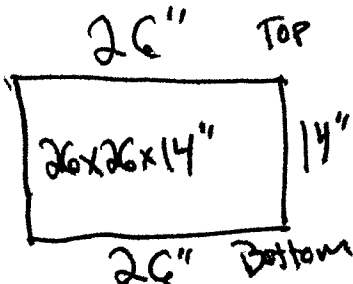
FOUNDATION: Foundations can be installed only by a contractor with a valid foundation contract with the Town of Stowe. If the installer is other than the undersigned dealer, a separate work order/permit is required for the foundation.

MEMORIAL or FLUSH MARKER: Flush markers are installed by the Town of Stowe after delivery to the Superintendent of Cemeteries.

Include a sketch with the following:

- 1) Dimensions
- 2) Front and back views
- 3) Material and Finish (please note – colorized designs are not permitted)
- 4) Location on lot or group of lots in the space below **or attach separately.**

Base Replacement
Beere grey granite



Work Order Permit Application must be received 14 days prior to monthly meetings of the Commission. Late or incomplete submission will be tabled.

I have read and will abide by the Rules and Regulations of Stowe Cemeteries, dated May 2022.

Memorial Dealer signature [Signature] Date 8.28.24

Memorial Dealer (print name) Jeffrey Pignone Phone 802-393-9368

Mailing address 44 Seldon Rd St. Albans, VT 05478

Email Address _____ Fax _____

All work must be scheduled with the Superintendent of Cemeteries by phone, text or email and a copy of this form must be in the possession of the contactor or subcontractor doing the work. Phone (802) 730-6144 or ddanforth@stowevt.gov.

BURIAL RIGHTS HOLDER/MEMORIAL PURCHASER AUTHORIZATION

I hereby authorized the above Memorial Dealer / Foundation Contractor, to execute the above work in accordance with the Rules and Regulations of Stowe Cemeteries. No work will be done until all information is complete and approved.

Holder/Purchaser Signature CATHY BALL Date 8/28/24
Holder/Purchaser (print name) Cathy Ball Phone 617-283-7508
Mailing Address 136 MOUNT VERNON ST., ARLINGTON, MA 02476
Email Address CLBALL27@AOL.COM Fax _____
Holder/Purchaser relationship to original Rights Holder: GREAT, GREAT GRANDDAUGHTER

FOR OFFICE USE ONLY:

Conditions: _____

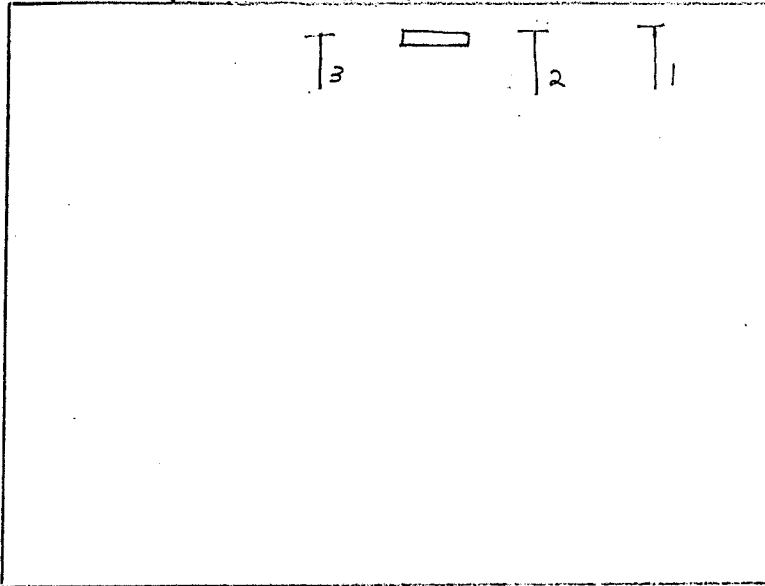
Authorized Signature: _____ Date _____

WEST BRANCH CEMETERY

SEARS, FRED

LOT #14 SEC # 1

CARE PERPETUAL



1 FRED M. SEARS

2 SUSAN E. - HIS WIFE

3 HENRY A. SEARS

4

5

6

7

8

SIZE LOT 10' x 16 1/2

RECORDED: Book Page

STOWE CEMETERY COMMISSION

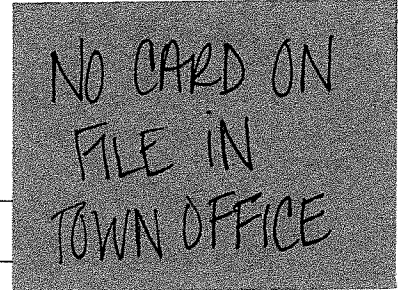
P.O. BOX 730, STOWE, VT 05672

Phone (802) 253-6133

Email: cemetery@stowevt.gov

Fax (802)253-6137

WORK ORDER PERMIT



Original Burial Rights (DEED) Holder (PRINT) Leonard Culver

Cemetery Name West Branch Section ? 126 Lot No. Right adjacent to Irene Culver

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials and must be ordered and installed by the Town of Stowe.

Corner Markers are in place? YES or NO ?

Corner Markers are needed? YES or NO

REQUEST FOR INSCRIPTION: Date/name can be approved by staff during regular business hours. Any other request must be approved by the Cemetery Commission. Include information in the space below.

REQUEST FOR CLEANING:

Composition of the memorial _____ Cleaning methos/agents _____

Maximum Size of Memorials, Stowe Cemeteries with lot size 4' x 12'

	Max Width 60 % of Lot	Max Face 20 % of Lot Including Base	Max Height Including Base
1 Lot	2.4 ft.	9.6 sq. ft	4 ft.
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4 Lots	9.6 ft.	38.4 sq. ft.	4 ft.

REQUEST TO INSTALL: Refer to Memorial and Foundation Specifications pages of the Stowe Cemeteries Rules and Regulations, May 2022 for allowed sizes and locations.

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I have read and will abide by the Rules and Regulations of Stowe Cemeteries, dated May 2022.

Memorial Dealer signature  Date 8.12.24

Memorial Dealer (print name) Jeffrey Pignona; Vermont Monuments Phone 802-393-9388


Mailing address 848 Sheldon Road Saint Albans, VT 05478

Email Address _____ Fax _____

All work must be scheduled with the Superintendent of Cemeteries by phone, text or email and a copy of this form must be in the possession of the contactor or subcontractor doing the work. Phone (802) 730-6144 or ddanforth@stowevt.gov.

BURIAL RIGHTS HOLDER/MEMORIAL PURCHASER AUTHORIZATION

I hereby authorized the above Memorial Dealer / Foundation Contractor, to execute the above work in accordance with the Rules and Regulations of Stowe Cemeteries. No work will be done until all information is complete and approved.

Holder/Purchaser Signature  Date 13/08/24
Jodina Clanton (Aug 13, 2024 07:46 PDT)

Holder/Purchaser (print name) Jodina Clanton Phone 3474231445

Mailing Address 33 Targee Street Staten Island NY 10304

Email Address Jodinaclanton@yahoo.com Fax _____

Holder/Purchaser relationship to original Rights Holder: Grandfather

FOR OFFICE USE ONLY:

Conditions: _____

Authorized Signature: _____ Date _____

Stowe Work Order; Culver marker

Final Audit Report

2024-08-13

Created:	2024-08-12
By:	Jeffrey Pignona (jp3.vermontmonuments@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAPT3yF6Ru4CaFvI6AJy_hFjdmMOUcM_h_

"Stowe Work Order; Culver marker" History

-  Document created by Jeffrey Pignona (jp3.vermontmonuments@gmail.com)
2024-08-12 - 11:52:06 PM GMT- IP address: 73.182.133.110
-  Document emailed to Jodi Clanton (jodinaclanton@yahoo.com) for signature
2024-08-12 - 11:52:09 PM GMT
-  Email viewed by Jodi Clanton (jodinaclanton@yahoo.com)
2024-08-13 - 1:03:09 AM GMT- IP address: 104.28.111.142
-  Document e-signed by Jodi Clanton (jodinaclanton@yahoo.com)
Signature Date: 2024-08-13 - 2:46:42 PM GMT - Time Source: server- IP address: 104.28.85.96
-  Agreement completed.
2024-08-13 - 2:46:42 PM GMT

SECTION 5, next to Irene Culver marker

20 X 10 X 4" Flush marker. Barre gray

JOANNNE CULLVER

1941 ↔ 2021

STOWE CEMETERY COMMISSION

P.O. BOX 730, STOWE, VT 05672

Phone (802) 253-6133

Email: cemetery@stowevt.gov

Fax (802)253-6137

WORK ORDER PERMIT

Original Burial Rights (DEED) Holder (PRINT) Carol Brewer
105 Depot St. #1466 Stowe VT 05672
 Cemetery Name Riverbank Section 28 Lot No. 37 & 38

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials and must be ordered and installed by the Town of Stowe.

Corner Markers are in place? YES or NO

Corner Markers are needed? YES or NO

REQUEST FOR INSCRIPTION: Date/name can be approved by staff during regular business hours. Any other request must be approved by the Cemetery Commission. Include information in the space below.

REQUEST FOR CLEANING:
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die 3'-0" x 0-8" x 2'-0"
base 3'-6" x 1'-2" x 0-8"

Black Granite, all polished

- centered over the 2 lots

Work Order Permit Application must be received 14 days prior to monthly meetings of the Commission. Late or incomplete submission will be tabled.

I have read and will abide by the Rules and Regulations of Stowe Cemeteries, dated May 2022.

Memorial Dealer signature Laura Bianchi Date 9/10/24

Memorial Dealer (print name) Laura Bianchi Phone 802-279-7108

Bianchi Stone Crafters
Mailing address 89 Center Rd Essex VT 05452

Email Address info@bianchistonecrafters.com Fax _____

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P.O. BOX 730, STOWE, VT 05672

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- centered over the
2 lots

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I have read and will abide by the Rules and Regulations of Stowe Cemeteries, dated May 2022.

Foundation

Memorial Dealer signature James Woodman Date 9/10/24

Memorial Dealer (print name) James Woodman Phone 802-338-1607

Mailing address P.O. Box 3072, Burlington, Vt 05408

Email Address 3.stonevt@gmail.com Fax _____

STOWE CEMETERY COMMISSION
P.O. BOX 730, STOWE, VT 05672

Phone (802) 253-6133

Email: townclerk@stowevt.gov

Fax (802)253-6137

WORK ORDER PERMIT

Original Deed Holder's Name/Burial Rights Holder's (please print)

Carol Brewer

Cemetery Name Riverbank Section 28 Lot No. 37 & 38

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials. If needed, they are to be ordered through the Town, and will be set in place by the Town at the direction of the Superintendent of Cemeteries.

Corner Markers are in place Corner Markers are needed

REQUEST TO INSTALL

FOUNDATION ~ Foundations can be installed only by a contractor with a valid foundation contract with the Town of Stowe. If the installer is other than the undersigned dealer, a separate work order/permit is required for the foundation.

MEMORIAL ~ A to-scale sketch or blueprint is required. It must have dimensions and show the front and back views if different or inscribed. Include any inscriptions or designs, the memorial material, color and finish. Artificial color may not be added to memorials. Please indicate the exact location on the lot or group of lots.

MARKERS (grass level) ~ A to-scale Sketch or blueprint is required with the same information required as described above for a memorial.

INSCRIPTIONS ~ Sketch and information attached. (Requests for date and name can be approved by the Town Clerk and/or staff during regular business hours)

CLEANING ~ Please state the composition of the memorial to be cleaned, and the method and agents to be used to clean.

GUARANTEES for Memorials and/Markers & Foundations

The undersigned memorial purchaser/Burial Rights Holder has received a copy of the memorial guarantee from the Memorial Dealer for quality of material and manufacture.

The undersigned Burial Rights Holder/foundation purchaser has received a copy of foundation contractor's guarantee of workmanship. *Please Note: All foundation contractors must have a valid Certificate of Insurance to work in Stowe Cemeteries.

ADDITIONAL REQUESTS Explain request (unveilings, etc.) and attach to Work Order Permit. Such requests must be approved and scheduled.

Work Order Permit Application must be received by the 1st of the month prior to the Commission meeting. All outside workers must have a Certificate of Insurance on file with the Town. I request that the work order submitted be approved. I have read the Rules and Regulations of Stowe Cemeteries, dated September 2018, and I agree to abide by them.

Memorial Dealer signature Laura Bianchi Date 9-5-24
Memorial Dealer (print name) Laura Bianchi Phone 802-879-7108
Mailing address 89 Center Rd, Essex, Vt 05450

BURIAL RIGHTS HOLDER/MEMORIAL PURCHASER AUTHORIZATION

I have read the foregoing order and agreement. You are hereby authorized to schedule said Memorial Dealer / Foundation Contractor, to execute the above work in accordance with this form and attached information. I understand that any work is subject to the Rules and Regulations of Stowe Cemeteries and that no work will be done until both the memorial and foundation are approved.

Holder/Purchased Signature Carol Brewer Date 9-5-24
Holder/Purchaser (print name) CAROL BREWER Phone 781-454-7291
Mailing Address 105 Depot St. #1466 Stowe, VT 05672
Holder/Purchaser relationship to original Rights Holder: OWNER
Mailing Address 105 Depot St. #1466 Stowe, VT 05672

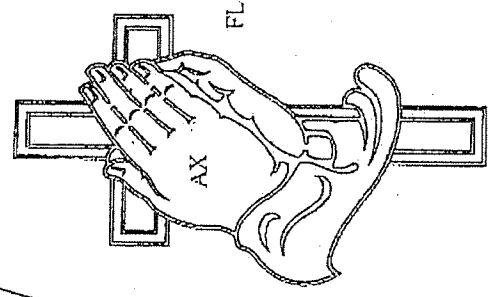
STOWE CEMETERIES AUTHORIZATION

Conditions or specifications: _____

Authorized Signature: _____ Date: _____

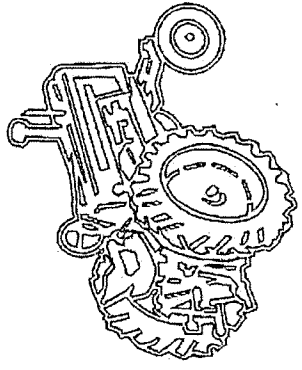
THIS WILL BE IN 2" LETTERS

POLISHED



FLAT CARVED

Glory to God



BREUER

CAROL VIOLA

1946 →

TOM EDWIN

1946 → 2021

SHALLOW SCOOPED LETTERS

BIANCHI STONE CRAFTERS # 1876

3-0 X 0-8 X 2-0 BLACK DIE

ALL POL, SPECIAL SHAPE

S/B CARVE 1, LETTER 1

BSC1876

CAD K

PLEASE CHECK CAREFULLY

WE WILL NOT BE RESPONSIBLE FOR ANY ERRORS AFTER THE APPROVAL OF THIS DRAWING

APPROVAL..... DATE.....

1"

2 1/2"

1 1/4"

1"

RIVER BANK CEMETERY

BREUER, CAROL

PLOT: 37 + 38 SECTION: 28

CARE

	T,
--	----

1 TOM BREUER (FB) 2021

2

3

4

5

6

7

8

SIZE LOT 4 X 12

RECORDED: Book A Page 411

Lindsay N. Turiello

From: Donna Adams <donna.john.adams@gmail.com>
Sent: Friday, September 6, 2024 11:18 AM
To: Penny Davis; Lindsay N. Turiello; David Danforth; Matt Frazee; Charles Safford
Subject: [EXTERNAL] Topics for meeting September 17, 2024

These are topics that came up at our last meeting of the Cemetery Commission. I've tried to include everything that members were asking about. I'm hoping the list will help in preparation for the upcoming meeting so that we can be as efficient as possible with our time and yours. Donna

Describe cross training protocols

Describe the process in place for the:

- Sale of burial rights
- Booking of interments
- Resolution of questions/ complaints

Describe the communication process with Parks: encounter forms or computer file forms?

Describe the path a work order takes though the office to completion.

Who accesses the cemetery email and fax? Is there a protocol in place for cross checking?

Where are work orders and other cemetery files stored?

**** WARNING ****

This message originated from an external email account. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Lindsay N. Turiello

From: Donna Adams <donna.john.adams@gmail.com>
Sent: Thursday, September 5, 2024 12:31 PM
To: Lindsay N. Turiello; David Danforth
Subject: [EXTERNAL] communication

To help with a more streamlined process for interment, work orders, etc. I've come up with some ideas that may be helpful or at least a place to start the discussion of what works and what doesn't.

When burial rights are sold, David should get a copy of it along with the corner marker purchase so that he can place temporary corner markers.

Would it be helpful if David got an updated lot map/schematic every couple of weeks or along with the above?

When David receives the corner markers from VT Monuments, they should have paperwork included. Can he send a form to Lindsay recording the delivery date and date of installation? Or add a section to the form so that David can check off and send back when they are delivered and installed? (Lindsay or David should notify the Cemetery Commission if they are not being delivered in a timely manner so that we can address the specifications of the contract with Jeff.)

David will need to order more temporary markers.

RE: Work orders:

David should receive a copy of the approved work order for a monument, foundation, cleaning, inscription etc.

David should mark the lot where the work is to take place so that contractors know where to work. As always, no work is to be done until corner markers are in place and the contractor needs to notify David of his schedule.

As to flush markers: they should be delivered with paperwork and David needs to initial the receipt, date of installation, its placement on the lot and send a copy to Lindsay. I don't know if that can be done with the present form or if something needs to be added to keep everyone informed.

David should get a copy of the interment order and map, which I assume is happening now. He needs to prepare the gravesite, and make sure that either temporary or permanent corner markers are in place. There should be alternate contact information for the office, funeral director or family member making the arrangements, and substitute staff if David is not available that day.

I think these suggestions will be helpful, and realize that it will take a few extra steps or revision of forms to make changes possible. I'm glad to meet with you to help, or welcome suggestions from you. I want to make your jobs more efficient in the long run, and also make it possible for any new or inexperienced staff to have a roadmap to follow for training.

Thanks, Donna

STOWE CEMETERY COMMISSION

P.O. BOX 730, STOWE, VT 05672

Phone (802) 253-6133

Email: cemetery@stowevt.gov

Fax (802)253-6137

WORK ORDER PERMIT

Original Burial Rights (DEED) Holder (PRINT) Henriette von Trapp

Cemetery Name Riverbank Section C 23 Lot No. 7

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials and must be ordered and installed by the Town of Stowe.

Corner Markers are in place? **YES** or **NO**

Corner Markers are needed? **YES** or **NO**

REQUEST FOR INSCRIPTION: Date/name can be approved by staff during regular business hours. Any other request must be approved by the Cemetery Commission. Include information in the space below.

REQUEST FOR CLEANING:

Composition of the memorial Granite Cleaning methos/agents Pressureized water simple green

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I have read and will abide by the Rules and Regulations of Stowe Cemeteries, dated May 2022.

Memorial Dealer signature Bruce Godin Date 9-10-24

Memorial Dealer (print name) Bruce Godin Phone 802-279-8117

Mailing address 167 Moscow Rd Stowe VT 05672

Email Address _____ Fax _____

All work must be scheduled with the Superintendent of Cemeteries by phone, text or email and a copy of this form must be in the possession of the contactor or subcontractor doing the work. Phone (802) 730-6144 or ddanforth@stowevt.gov.

BURIAL RIGHTS HOLDER/MEMORIAL PURCHASER AUTHORIZATION

I hereby authorized the above Memorial Dealer / Foundation Contractor, to execute the above work in accordance with the Rules and Regulations of Stowe Cemeteries. No work will be done until all information is complete and approved.

Holder/Purchaser Signature  Date August 27, 2024

Holder/Purchaser (print name) George von Trapp Phone 802-244-8693

Mailing Address 1303 Kneeland Flats Rd, Waterbury Center, VT 05677

Email Address GvTrapp@aol.com Fax _____

Holder/Purchaser relationship to original Rights Holder: Son

FOR OFFICE USE ONLY:

Conditions: _____

Authorized Signature: _____ Date _____

STOWE CEMETERY COMMISSION
P.O. BOX 730 STOWE, VT 05672

Phone (802) 253-6147

Email ballaire@stowevt.gov

Fax (802)253-2702

WORK ORDER PERMIT

Original Deed Holder's Name/Burial Rights Holder's (please print)

Harold Walker / Pauline Chamberlain

Walker's

Cemetery Name Riverbank Section 12A South # Lot No. 5

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials. If needed, they are to be ordered through the Town, and will be set in place by the Town at the direction of the Superintendent of Cemeteries.

Corner Markers are in place _____ Corner Markers are needed _____

REQUEST TO INSTALL

FOUNDATION Foundations can be installed only by a contractor with a valid foundation contract with the Town of Stowe. If the installer is other than the undersigned dealer, a separate work order/permit is required for the foundation.

MEMORIAL A to-scale sketch or blueprint is required. It must have dimensions and show the front and back views if different or inscribed. Include any inscriptions or designs, the memorial material, color and finish. Please indicate the exact location on the lot or group of lots.

_____ **MARKERS (grass level)** A to-scale Sketch or blueprint is required with the same information required as described above for a memorial.

_____ **INSCRIPTIONS** Sketch and information attached. (Requests for date and name can be approved by the Town Clerk and/or staff during regular business hours)

✓ _____ **CLEANING** Please state the composition of the memorial to be cleaned, and the method and agents to be used to clean. Pressurized water

_____ **GUARANTEES for Memorials and/Markers & Foundations**

The undersigned memorial purchaser/Burial Rights Holder has received a copy of the memorial guarantee from the Memorial Dealer for quality of material and manufacture.

The undersigned Burial Rights Holder/foundation purchaser has received a copy of foundation contractor's guarantee of workmanship. ***Please Note:** All foundation contractors must have a valid Certificate of Insurance to work in Stowe Cemeteries.

ADDITIONAL REQUESTS Explain request (unveilings, etc.) and attach to Work Order Permit. Such requests must be approved and scheduled.

Work Order Permit Application must be received by the 24th of the month before the Commission meeting. All outside workers must have a Certificate of Insurance on file with the Town. I request that the work order submitted be approved. I have read the Rules and Regulations of Stowe Cemeteries, dated May 9, 2017, and I agree to abide by them.

Memorial Dealer signature _____ Date _____

Memorial Dealer (print name) _____ Phone _____

Mailing address _____

BURIAL RIGHTS HOLDER/MEMORIAL PURCHASER AUTHORIZATION

I have read the foregoing order and agreement. You are hereby authorized to schedule said Memorial Dealer / Foundation Contractor, to execute the above work in accordance with this form and attached information. I understand that any work is subject to the Rules and Regulations of Stowe Cemeteries and that no work will be done until both the memorial and foundation are approved.

Holder/Purchased Signature Kathy Walker Renaud Date 9/13/24

Holder/Purchaser (print name) Kathy Walker Renaud Phone 802-793-9006

Mailing Address P.O. Box 37 Hardwick, VT 05843

Holder/Purchaser relationship to original Rights Holder: Daughter

Mailing Address _____

STOWE CEMETERIES AUTHORIZATION

Conditions or specifications: _____

Authorized Signature: _____ Date _____

ALL work must be scheduled with Bruce Godin, Superintendent of Cemeteries. Phone # 802-793-6811

Installer: _____ Phone: _____

STOWE CEMETERY COMMISSION
P.O. BOX 730 STOWE, VT 05672

Phone (802) 253-6147

Email ballaire@stowevt.gov

Fax (802)253-2702

WORK ORDER PERMIT

Original Deed Holder's Name/Burial Rights Holder's (please print)

Chase

Cemetery Name Riverbank Section 12A N#3 Lot No. 37

Commission approved Corner Markers are required for all lots or groups of lots prior to the placement of any memorials. If needed, they are to be ordered through the Town, and will be set in place by the Town at the direction of the Superintendent of Cemeteries.

Corner Markers are in place _____ Corner Markers are needed _____

REQUEST TO INSTALL

FOUNDATION Foundations can be installed only by a contractor with a valid foundation contract with the Town of Stowe. If the installer is other than the undersigned dealer, a separate work order/permit is required for the foundation.

MEMORIAL A to-scale sketch or blueprint is required. It must have dimensions and show the front and back views if different or inscribed. Include any inscriptions or designs, the memorial material, color and finish. Please indicate the exact location on the lot or group of lots.

_____ **MARKERS (grass level)** A to-scale Sketch or blueprint is required with the same information required as described above for a memorial.

_____ **INSCRIPTIONS** Sketch and information attached. (Requests for date and name can be approved by the Town Clerk and/or staff during regular business hours)

CLEANING Please state the composition of the memorial to be cleaned, and the method and agents to be used to clean. *Pressurized water*

_____ **GUARANTEES for Memorials and/Markers & Foundations**

The undersigned memorial purchaser/Burial Rights Holder has received a copy of the memorial guarantee from the Memorial Dealer for quality of material and manufacture.

The undersigned Burial Rights Holder/foundation purchaser has received a copy of foundation contractor's guarantee of workmanship. ***Please Note:** All foundation contractors must have a valid Certificate of Insurance to work in Stowe Cemeteries.

ADDITIONAL REQUESTS Explain request (unveilings, etc.) and attach to Work Order Permit. Such requests must be approved and scheduled.

Work Order Permit Application must be received by the 24th of the month before the Commission meeting. All outside workers must have a Certificate of Insurance on file with the Town. I request that the work order submitted be approved. I have read the Rules and Regulations of Stowe Cemeteries, dated May 9, 2017, and I agree to abide by them.

Memorial Dealer signature _____ Date _____

Memorial Dealer (print name) _____ Phone _____

Mailing address _____

BURIAL RIGHTS HOLDER/MEMORIAL PURCHASER AUTHORIZATION

I have read the foregoing order and agreement. You are hereby authorized to schedule said Memorial Dealer / Foundation Contractor, to execute the above work in accordance with this form and attached information. I understand that any work is subject to the Rules and Regulations of Stowe Cemeteries and that no work will be done until both the memorial and foundation are approved.

Holder/Purchased Signature Robert C Chase Date 9-12-24

Holder/Purchaser (print name) Robert C Chase Phone 802-253-4579

Mailing Address P.O. Box 187

Holder/Purchaser relationship to original Rights Holder: Soa

Mailing Address _____

STOWE CEMETERIES AUTHORIZATION

Conditions or specifications: _____

Authorized Signature: _____ Date _____

ALL work must be scheduled with Bruce Godin, Superintendent of Cemeteries. Phone # 802-793-6811

Installer: _____ Phone: _____