

## 2024 FOUNDATION REQUEST DATE: \_\_\_\_\_

Monument Company Information:

Contact Name:	Email:		
Phone #:	Fax #:		
Customer (Person Placing O	rder):		
Rights Holder Name (Monur	nent Name):		
	(Name of person where i	monument to b	
Cemetery Location:			
Foundation Size Required:	Size	Cost*	
(Check one)	Under 36 Inches	\$250.00	
Monument Size:		\$270.00	
Base Size:	42 Inches	\$305.00	
Date Required:	48 Inches	\$385.00	
C&M Amount:		\$495.00	
	Install Ground Setting	\$85.00	
	* Plus HST. Does not include C8	* Plus HST. Does not include C&M amount.	
Special Instructions:			
Example: centered over 2 lots			
Authorized Du			
Authorized By:			

Please complete and fax (705)752-3116 or email <u>clerk@callander.ca</u> \*\*Request MUST be signed by representatives of the Monument Company and the Rights Holder/Representative in order to be processed.

Office Use:		
Lot Location Completed by:		Paid 🗌
Date Competed:	Monument Company notified: 🔲 Date:	