

Madonna Cemetery & Mausoleum  
2070 Hoefley's Lane  
Fort Lee, NJ 07024  
Phone: (201) 944-7723  
Fax: (201) 944-3779

**Interment Authorization  
(Please print and complete)**

Date of Interment: \_\_\_\_\_ Time: \_\_\_\_\_ Parish: \_\_\_\_\_

Deceased: \_\_\_\_\_ Cem./Crypt: \_\_\_\_\_ Sec.: \_\_\_\_\_ Plot/Tier: \_\_\_\_\_

Cement Vault     Sealing Ziegler     Urn     #40 Double Zinc Liner

Steel Vault     Casket Only     Wood Box

Funeral Director: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Vault Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Rightful Holder of Certificate: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*Certificate of Right of Interment must be presented for each interment.*

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***If Rightful Holder of Certificate is living:***

I/We, the undersigned, rightful holder(s) of Certificate of Interment/Entombment of Grave/Crypt(s) in Cemetery/Crypt \_\_\_\_\_, Section \_\_\_\_\_, Tier \_\_\_\_\_, Grave # \_\_\_\_\_, hereby authorize Madonna Cemetery to inter/entomb the remains of \_\_\_\_\_ in said grave/crypt/niche.

Signed: \_\_\_\_\_ Print: \_\_\_\_\_

Signed: \_\_\_\_\_ Print: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Witness (Funeral Director): \_\_\_\_\_

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***If Rightful Holder of Certificate is deceased, all rightful heirs:***

I/We, the undersigned, rightful holder(s) of Certificate of Interment/Entombment of Grave/Crypt(s) in Cemetery/Crypt \_\_\_\_\_, Section \_\_\_\_\_, Tier \_\_\_\_\_, Grave # \_\_\_\_\_, in the name of \_\_\_\_\_ deceased, hereby authorize Madonna Cemetery to inter/entomb the remains of \_\_\_\_\_ in said grave/crypt/niche.

Signed: \_\_\_\_\_ Print: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signed: \_\_\_\_\_ Print: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Witness (Funeral Director): \_\_\_\_\_

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