

## Supplemental Form to Application for Financial Assistance from Distressed Cemetery Fund

I. Corporation
Corporation's Governing Board:
Chair: Director:
Director: Director:
Director: Director:
Principal Shareholder:Percent of stock:
Other shareholders, in any order of stock ownership percentage:
The president of the corporation and address:
The corporation holds contiguous acres for use as a single cemetery, of which
acres are developed or immediate use.
II. Cemetery Information
The cemetery has: Single Plot $\square$ Double Depth Plot $\square$ Niche or Columbarium $\square$
Lawn Crypts □ Community Mausoleum □ Private Mausoleum □
Scattering Garden □ Memorial: Upright □ Lawn Level □ Both □
Cemetery GPS Coordinates:
Estimated number of interments made in prior year:
The corporation has constructed or will soon construct an above ground mausoleum
Yes $\square$ No $\square$ One or more family-size mausoleums Yes $\square$ No $\square$
The corporation does (will) assess a one-time charge on each contract/application for the care
of the markers, vases, etc. Yes $\square$ No $\square$
III. Fiscal
The corporation's fiscal year closing month:
An endowment or perpetual care fund has been established at:
Name and Address
Principal amount funded: \$ Surety bond amount: \$
IV. Person Completing this Registration Form
I hereby affirm, under penalty of perjury that all of the information submitted in this application
is true, correct, and complete. I am aware that knowingly and willfully making a material
misstatement in connection with an application for registration is grounds for the denial, refusal
to renew, suspension, or revocation of a registration/license.
Printed Name: Signature: Individual filing this application
Title: Date: