



502 2<sup>ND</sup> Avenue-Box 299  
Bassano, AB T0J 0B0  
www.bassano.ca

## Engraving Application

Date: \_\_\_\_\_

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone # \_\_\_\_\_

Engraving: \_\_\_\_\_

Family Name

First Name \_\_\_\_\_

Second Name \_\_\_\_\_

Third Name: \_\_\_\_\_

Year of Birth and Death \_\_\_\_\_

Inscription \_\_\_\_\_

Approval for the engraving is hereby given this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

Plot/Niche# \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

Office Use Only

Engraving Fee	\$ _____
Shipping and Handling	\$ _____
Permit Fee	\$ _____
GST	\$ _____
Total	\$ _____

This information is being collected for the purpose of establishing cemetery records pursuant to the provisions of the Municipal Government Act and its regulations, and pursuant to Section 32C of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and distribution of this information, you may contact the Town of Bassano FOIP Coordinator at (403)641-3788