

MEMORIAL DEDICATION APPLICATION

SECTION 1: APPLICANT INFORMATION

Name: _____

Mailing Address: _____

Email: _____

Phone Number: _____

SECTION 2: MEMORIAL INFORMATION **Memorial Specifications are provided in the Memorial Regulations (Schedule "C" of Policy No. 207-AD-19)*

The City of Cold Lake is pleased to offer a memorial bench donation, as a means for loved ones to be remembered while giving back to the community. The exact location and placement shall be determined at the sole discretion of the City. The design and price is subject to change based on availability.

Basic Memorial Bench which includes Etched Bronze Bench Plaque - purchase, installation & maintenance for the life of the bench \$3800.00



Preferred Location:

- ☐ Lakeview Cemetery
☐ Grand Centre Memorial Park

Inscription: _____

SECTION 4: SIGNATURE

I understand that the placement of a dedicated bench does not confer to a donor or applicant any privilege or control of the land upon which the donated memorial may be situated. I certify that the information I have provided on this application is true to the best of my knowledge.

Applicant Signature: X _____ Date: _____

The donation and dedication of a memorial bench or other form of custom memorial feature at a City cemetery may be permitted, at the expense of the applicant, subject to a request being made, the approval of the City and providing the conditions in Schedule "C" of Policy No. 207-AD-19 are satisfied. The City shall have the sole discretion to determine whether the dedication will be authorized. In the event a plaque or structure is vandalized or goes missing, the City is not obligated to replace it.

OFFICE USE ONLY – AUTHORIZATION

The City of Cold Lake, as the owner of the cemetery, authorizes installation of the above described memorial donation and dedication in the _____ cemetery in Cold Lake, Alberta.

Legislative Services Manager Signature: X _____ Date: _____

Payment Type: ☐ Cash ☐ Cheque ☐ Debit ☐ Credit

Memorial Fee: \$ _____

GST: \$ _____

Total Cost: \$ _____

Receipt #: _____

Supplier: _____

Order Date: _____

Installation Date: _____

Parks Staff Notified: ☐

Received by Parks: ☐ Date: _____

5513 - 48 Avenue, Cold Lake, AB • T9M 1A1 • Ph: 780-594-4494 • Fax: 780-594-3480

Information on this form is collected for the sole use of the City of Cold Lake and is protected under the authority of the *Freedom of Information and Protection of Privacy Act*, Sec. 33 (c), which regulates the collection, use, and disclosure of personal information. If you have any questions or concerns, please contact the FOIP Coordinator by email (legislative@coldlake.com) or phone (780) 594-4494 ext. 7915.