

**MEMORIAL TREE & MEMORIAL BENCH APPLICATION****APPLICANT INFORMATION:**

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

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**REQUEST FOR MEMORIAL BENCH** Red Granite (straight bench)  Grey Granite (straight bench)  Grey Granite (curved bench)**REQUEST FOR MEMORIAL TREE** Hickory  Red Oak  Pin Oak  Ivory Silk Lilac  Autumn Blaze Maple  Zelkova

Planting locations as per attached site plan.

**MEMORIAL PLAQUE**  Yes  No**PLAQUE WORDING:**

(maximum 80 characters)

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\_\_\_\_\_  
\_\_\_\_\_\_\_\_\_\_  
Applicant Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Hanover Cemetery Representative\_\_\_\_\_  
Date