

Pompano Beach Cemetery

400 SE 23rd Ave.

Pompano Beach, FL 33062

(954) 786-4138

Terrance.Nelsonjr@copbfl.com



APPLICATION FOR INSTALLATION OF MARKER

Monument Company: _____ **Phone:** _____

Name on Marker: _____

Lawn/Block/Lot/Grave _____ Block: _____ Lot: _____ Grave: _____

Property Owner: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Manufacturer: _____

Property Owner/Deed Holder: Yes/No _____ *If not, relation to deceased: _____

Specifications: (attach design)

of Pieces _____ # of Names _____ # of Spaces _____

Marker Size: _____ Granite Base Size: _____

Length: _____ Length: _____ * Vase: Y / N

Width: _____ Width: _____

Height: _____ Height: _____

REVIEW CITY OF POMPANO BEACH RULES & REGULATIONS FOR ADDITIONAL INFORMATION

1. All monument fabrications must include a design and be pre-approved by Cemetery management.
2. Cemetery will review and return form to Monument Company or Funeral Home within 5 business days.
3. The Cemetery accepts no responsibility for the finished product.
4. The Cemetery is not responsible for the availability of additional future scrolls for the marker.
5. Any complaint concerning the marker will be directed to the monument dealer by the undersigned Purchaser.
6. All monument setters must provide proof of general liability insurance annually.

Requested: _____ Date: _____
(Property Owner)

Submitted: _____ Date: _____
(Monument Company or Funeral Home)

Approved: _____ Date: _____
(Cemetery Staff)

****(Approval expires after 120 days.)****