| INTERMENT APPLICATION FORM | | | | | | | | |
|----------------------------|---|---------------------|--------------------|---------------------------|-----------|----------|----------|------------|
| TO: | JAPANESE / | ASSOCIATION CEBU II | NC. | | | YEAR: | MONTH: | DAY: |
| | FURIGANA | | GENDER | DATE OF BIRTH | AGE | MEMBER | OCCUF | PATION |
| | NAME | | | | | YES / NO | | |
| D E | ADDRESS | | | | TELEPHONE | | | |
| | DOMICILE | | | | | | | |
| | | NAME | RELATION | ADDRESS AND TELEPHONE NO. | | | | |
| | | 1 | | | | | | |
| C | 25: 47:1/50 | 2 | | | | | | |
| A | RELATIVES | 3 | | | | | | |
| S | | 4 | | | | | | |
| E | | 5 | | | | | | |
| D | DATE OF DEATH | | CAUSE OF DEATH | URN SIZE (cm) | | | | |
| | DATE OF CREMATION | 1 | PLACE OF CREMATION | | | W: | L: | H: |
| | REMARKS: | 1 | | <u> </u> | | <u> </u> | <u> </u> | 1 |
| | KLWAKKO. | | | | | | | |
| | <u> </u> | | | | | | | |
| A | WE, the applicants for interment, would like to request for your kind approval to allow us to bury the ashes remains of the abovenamed deceased at the Japanese cemetery. In view of the above, we hereby ACCEPT and AGREE that the Japanese Association Cebu Inc. WILL NOT assume any responsibility on any debts or liability of the deceased. | | | | | | | |
| P | FURIGANA | | RELATIONSHIP TO | THE DECEASED | ME | EMBER | SIGNATUR | RE OR SEAL |
| Ιi | NAME | | | | YE | S / NO | <u> </u> | |
| ī | ADDRESS TELEPHONE: | | | | | | | |
| С | | | | | | EMAIL: | | |
| Α | FURIGANA | | RELATIONSHIP TO | THE DECEASED | Mi | EMBER | SIGNATUR | RE OR SEAL |
| N | NAME | | | | YE. | S / NO | | |
| T | ADDRESS TELEPHONE: | | | | | | | |
| | EMAIL: | | | | | | | |
| | REQUESTS DURING THE DAY OF INTERMENT: sutra chant, incense sticks, offerings (flowers, water, etc.) (at applicant's own expense and preparation) | | | | | | | |
| , | DATE RECEIVED | | (REMARKS:) | | | | | |
| N O - F | DATE APPROVED | | • | | | | | |
| C F H I | DATE OF INTERMENT | г | | | | | | |
| A C R E G R E | | | | | | | | |