

**NOTICE AND INFORMATION FOR
PERSONS SIGNING AND SUBMITTING AN
AFFIDAVIT OF AUTHORITY**

1. Purpose

The purpose of the Affidavit of Authority is to make the person or persons submitting the request for the Grave Opening responsible for providing true and complete information about the requested Interment, and to certify that they have the legal right to authorize the Interment.

2. Persons Having the Authority to Submit an Application

In accordance with the Rules and Regulations of Saint Anthony of Padua Cemetery, only the "Original Certificate Holder" or subsequent "Certificate Holder" is permitted to authorize an Interment in a Cemetery Lot. The "Original Certificate Holder" is the individual or husband and wife identified on the Burial Privileges Certificate as the original purchaser of the Burial Privileges. The subsequent "Certificate Holder" is the person or persons, if any, identified as the specific devisee of the Burial Privileges under the last will of the Original Certificate Holder. If no such devise has been made, then the subsequent "Certificate Holder" is the person or persons, if any, identified in the written instructions of the Original Certificate Holder that have been placed on file with the records of the Cemetery. If there are no such written instructions on file, then in accordance with civil law the subsequent "Certificate Holder" is all of the heirs of the Original Certificate Holder.

3. Reliance by the Cemetery and Saint Anthony of Padua Parish

In accordance with the Rules and Regulations of Saint Anthony of Padua Parish, the Cemetery and Saint Anthony of Padua Parish have the right to rely on the statements made in the notarized Affidavit of Authority made by any one or more of the heirs of the Original Certificate Holder.

4. Consequences for Failure to Obtain Consent or Provide True and Complete Information

If, after an Interment, a lawful heir or devisee claims that they did not consent or agree to the Interment, the person or persons submitting the Affidavit of Authority will be responsible for defending the Cemetery and Saint Anthony of Padua Parish against the claim and reimbursing the Cemetery and Saint Anthony of Padua Parish for all costs incurred as a result of the claim.

AFFIDAVIT OF AUTHORITY

(Please Print or Type. All Blank Spaces Must be Completed.)

STATE OF PENNSYLVANIA

COUNTY OF _____ SS

The undersigned, being duly sworn according to the law, deposes and states as follows:

1. This Affidavit is submitted to Saint Anthony of Padua Parish with respect to the following:

Saint Anthony of Padua Cemetery, Section _____, Section _____, Row _____, Grave _____

2. The name that appears on the Burial Privileges Certificate for the above described Lot is:

_____ (The Original Certificate Holder)

3. This Affidavit of Authority is submitted for the purpose of permitting the Interment of the following decedent:

4. The undersigned are related to the Original Certificate Holder as follows:

5. The undersigned are related to the decedent as follows:

6. The decedent is related to the Original Certificate Holder as follows:

7. The following are the names of all of the surviving heirs at law, including any surviving spouse or children of the Original Certificate Holder (if there are none, then please write "none" on the top right line below):

_____	_____
_____	_____
_____	_____

8. The undersigned have obtained the consent, approval, and agreement of all of the surviving heirs at law of the Original Certificate Holder in order to permit the Interment described on this Affidavit of Authority.

9. The undersigned have not received any compensation or consideration, monetary or otherwise, in connection with the submission of this Affidavit of Authority.

10. The undersigned acknowledges that the Cemetery and Saint Anthony of Padua Parish will be relying upon the statements made herein in determining whether to permit the Interment described on this Affidavit of Authority.

THE UNDERSIGNED APPLICANT, INTENDING TO BE LEGALLY BOUND, WARRANTS THAT HE/SHE HAS THE FULL LEGAL AUTHORITY TO PERMIT THE INTERMENT IN THE WITHIN DESCRIBED LOT, AND AGREES TO INDEMNIFY, DEFEND, AND HOLD HARMLESS THE CEMETERY AND SAINT ANTHONY OF PADUA PARISH, AND EACH OF THEIR AGENTS AND EMPLOYEES, FROM AND AGAINST ANY CLAIMS ARISING FROM THE CEMETERY PERMITTING THE REQUESTED INTERMENT, INCLUDING CLAIMS MADE BY HEIRS AND FAMILY MEMBERS OF THE CERTIFICATE HOLDER.

Name(s) Signature(s) _____ (Printed) _____

Address(s) _____ Telephone _____

Sworn and subscribed before me, the undersigned Notary Public, on _____ day of _____ of 20 _____

Notary Public

My Commission Expires _____

SEAL