



### CREMATION DISPOSAL PERMIT (Scattering Garden)

SECTION: \_\_\_\_\_

YEAR: \_\_\_\_\_

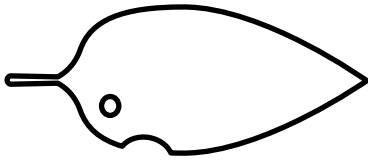
NUMBER: \_\_\_\_\_

Name of deceased: \_\_\_\_\_

Name of Purchaser: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

DIMENSIONS OF LEAF MONUMENT: SEE DIMENSIONS ON REVERSE



*\*All leaf monuments will be approved by city staff and engraved by Legacy Jewelers in Fort Saskatchewan.*

Diagram, including leaf engraving must be attached before permit will be approved. The City is not responsible for the accuracy of engraved content or any leaf monument placed or engraved without authorization.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name if different from above contact: \_\_\_\_\_

**STEP 1: Approval (City office staff)**

APPROVED:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Verified by: \_\_\_\_\_

**STEP 2: Request for installation (Parks)**

Date leaf to be installed: \_\_\_\_\_

**STEP 3: Marking and verification (City staff only)**

Requested by: \_\_\_\_\_  
Print name \_\_\_\_\_ Date \_\_\_\_\_

Delivered to Vender by: \_\_\_\_\_  
Print name \_\_\_\_\_ Date \_\_\_\_\_

Picked up from Vender by: \_\_\_\_\_  
Print name \_\_\_\_\_ Date \_\_\_\_\_

Parks notified by: \_\_\_\_\_  
Print name \_\_\_\_\_ Date \_\_\_\_\_

Installed by: \_\_\_\_\_  
Print name \_\_\_\_\_ Date \_\_\_\_\_

# SCATTERING GARDEN LEAF ENGRAVING

16 CM

7 CM

LINE 1: (Last Name) – 20 letters max.

LINE 2: (First Name, Middle Name) – 22 letters max.

LINE 3: (Date of birth – Date of passing)

LINES 4 (Words of Memory) – 27 letters max.

LINE 1 \_\_\_\_\_

LINE 2 \_\_\_\_\_

LINE 3 \_\_\_\_\_

LINE 4 \_\_\_\_\_

(Month) (Day) (Year) (Month) (Day) (Year)

Name of Purchaser: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*Please sign and date confirming that the information given is correct.

## FOR CITY STAFF ONLY:

Leaf approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Parks approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Dropped off to Legacy by: \_\_\_\_\_ Date: \_\_\_\_\_

Picked up from Legacy by: \_\_\_\_\_ Date: \_\_\_\_\_

Installed by: \_\_\_\_\_ Date: \_\_\_\_\_

