

**The Corporation of the Municipality of Thames Centre  
Dorchester Union Cemetery  
Order for Interment**

Name of Deceased: \_\_\_\_\_

Funeral Director/Home or other such person making the arrangements:

\_\_\_\_\_

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

Requested Burial Date: \_\_\_\_\_

Note: 2 business days' notice required (16 working hours in advance)

Service Time: \_\_\_\_\_

Graveside/approximate time of arrival at cemetery: \_\_\_\_\_

Grave/Niche Location:

Section: \_\_\_\_\_ Range: \_\_\_\_\_ Row/Column: \_\_\_\_\_ Grave/Niche: \_\_\_\_\_

Contact the Cemetery Coordinator to verify location or to request the mapping index for reference 519-268-7334 x227 – **location must be completed.**

Type of Burial: Full/Casket  Cremation  urn dimensions: \_\_\_\_\_

Vault: (required in Section 5 for full burial) No  Yes , if so...

Size: \_\_\_\_\_ Supplier: \_\_\_\_\_

Next of Kin Information:

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

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

\_\_\_\_\_

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

Relationship to Deceased: \_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Arrangements for interments cannot be confirmed until cemetery staff have been informed and receipt of this completed form has been provided to the Municipal Office via email to [tbutt@thamescentre.on.ca](mailto:tbutt@thamescentre.on.ca) or fax 519-268-3928  
**Payment and burial permit/cremation certificate are required prior to interment taking place.**

Municipality of Thames Centre 4305 Hamilton Road, Dorchester, ON N0L 1G3 519-268-7334 x227  
Dorchester Union Cemetery 2251 Dorchester Road, Dorchester, ON N0L 1G0