

Mailing Address:
P.O. Box 296
Robbins NC 27325
Phone: 910.948.2431 | **Fax:** 910.948.3981
info@townofrobbins.com (Clerk)
manager@townofrobbins.com (Manager)



Traditional Burial Cost is \$1000
Cremation Burial Cost=\$ 650
**Includes application fee and open/close fee*
**A \$400 Rock Fee is added, if applicable*

For Office Use Only	
Date Received:	
Date Paid:	
Date Approved:	

Application for Burial Permit Application

Has the owner purchased lots at Pine Rest Cemetery? ☐ Yes ☐ No ☐ Unknown

Date of Application:			
Name of Deceased:			
Name of Funeral Home:			
Mailing Address:			
Funeral Home Point of Contact:		Phone Number #:	
E-Mail Address:			
Quadrant:			
Location:	Block #	Space #	
Relationship of Deceased to Owner:			
If Plot has been purchased, but no deed is present please provide information to help our search (name of owner, general location, and other points of reference)			

If the purchase has not been made, the Cemetery Purchase application will need to be filled out and paid in full.

Order of Priority

Owners and their spouses are allowed to be buried in plots (unless specifically designated) along with any designation the owner(s) made prior to death. Upon the death of owner(s) lineal, descendants (and family members) of the owner are allowed to be buried in remaining plots on a first come, first served basis. No one will be allowed to be buried in a spot not owned by them unless an affidavit, signed by a living relative or legal representative, affirming that the deceased individual has the right to be buried in a grave purchased by the owner. The Town of Robbins does not accept liability for false statements.

PERMIT ISSUANCE: This Burial Permit is hereby issued this the ____ day of _____ in the year of _____.

By: _____ ☐ Town Manager ☐ Town Clerk ☐

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Affidavit of Permission to be Buried

I, _____, am the legal representative or family member of the deceased individual _____. I affirm and attest to the knowledge that previously named deceased individual has permission to be buried in the location submitted on the burial application. I affirm that all information submitted is truthful and that I along with the estate of the deceased individual, will be responsible for any inaccuracies or issues arising out of this arrangement. The Town of Robbins is not liable for any untruthful or mistaken statements.

Signature: _____ Printed Name: _____

Date: _____

North Carolina

_____ County

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the ____ day of _____

Notary Public

My Commission Expires _____

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Checklist

- ☐ Clerk/Manger received burial permit
- ☐ Do they have authority?
Is the deceased individual:
 - Owner? → Yes
 - Owner's Spouse? → Yes
 - Is there a signed designation--THIS GOVERNS
If not:
 - Children of Owner (or lineal descendants)? → O.K.
 - Not related? → Not allowed UNLESS
 - requesting party signs an affidavit of permission
- ☐ Identify & confirm location.
 - If they have a space designated → O.K.
 - If none → We will place & confirm with funeral - they must notify us within 24 hours of funeral
- ☐ Stake off location
- ☐ Arrange grave digging (open & close)
- ☐ Return permit to Funeral Home.
- ☐ Recived Bill from Grave Digging Service—Date: _____
- ☐ Billed Funeral Home--- Date: _____
- ☐ Payment Received--- Date: _____