**BURIAL RIGHTS AFFIDAVIT**

**Designee for Interment Right and Successor Assignment Designation**

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

Purchaser:

 Last Name First Name Middle Name

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

 Street City State Zip

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designee:

 Last Name First Name Middle Name

Designee:

 Last Name First Name Middle Name

Designee:

 Last Name First Name Middle Name

Designee:

 Last Name First Name Middle Name

Location:

 Block Lot Grave

**Acknowledgement**

By signing below, I understand that as purchaser by signing the above section, I may designate this Interment Right to be used by my appointed designee(s) for their burial. Designees must be either a resident or eligible nonresident of the Cemetery District from which I am purchasing the Interment Right. I understand that all fees and charges must be paid prior to any burial being allowed.

By signing below, I acknowledge that I have been informed and understand my rights as a purchaser of the Burial Rights and have received a copy of the District Rules and Regulations and that the Health and Safety Code §9069.20 and Probate Code §6400 to 6413 state the rights of succession.

 **If this box is initialed only Designees listed may be interred in the above mentioned plots.**

I understand I have the right to inter in the above-referenced location in the following manner.

**ONE FULL PLOT MAY CONTAIN FOUR HEADSTONES AND THE FOLLOWING: (Circle one)**

1. **A single casket burial and up to three cremated remains burials (four cremains if no casket burial)**
2. **A double depth casket burial (liners are already installed in the plot)**

**ONE ASH PLOT MAY CONTAIN ONE HEADSTONE AND TWO CREMATED REMAINS.**

 Purchaser Signature for Acknowledgement

**Successor Assignment Designation**

By signing below, I hereby assign and designate these interment rights, subject to the restrictions below, to the following in the order named:

1.

 Last Name First Name Middle initial

 Telephone

1.

 Last Name First Name Middle Initial

 Telephone

1.

 Last Name First Name Middle Initial

 Telephone

1.

 Last Name First Name Middle Initial

 Telephone

I further acknowledge and understand that this assignment for the Interment Rights purchased above does not assign new ownership unless I am no longer competent to control my own affairs. These Interment Rights will pass in the order that I have selected to the names above and this order will stay in effect until I have changed and filed a new designation with the Russian River Cemetery District.

 Purchaser Signature for Assignment Designation

PUBLIC CEMETERY DISTRICT’S

RIGHTS TO SUCCESSION OF OWNERSHIP

As referenced in Health and Safety Code §9069.25 and Probate Code §6400 to 6413

Decedent or Owner on Record

Decedent’s Agent under POA for Health Care

Decedent’s Spouse or Registered Domestic Partner

Decedent’s Child/Children

Decedent’s Parent/Parents

Decedent’s Sibling/Siblings

Decedent’s Grandparent/Grandparents

Decedent’s Uncle’s or Aunt’s

Predeceased Spouse Children – (decedent’s step children)

All other surviving next of kin in the order of claim through nearest ancestor

Predeceased Spouse Parents

Surviving issue of Parents of Predeceased Spouse – (brother’s and sister’s in laws)