



DEPARTMENT OF PUBLIC WORKS

873 Massachusetts Avenue
Boxborough, Massachusetts 01719
(978) 264-1790

dpw@boxborough-ma.gov www.boxborough-ma.gov

INTERMENT ORDER

Decedent Name: _____

Decedent Address: _____

Date of Death: _____ Date of Birth: _____

Veteran: _____ Branch: _____ Theater: _____

Interment Date: _____ Hour: _____

Section _____ Lot # _____ Grave # _____

Full Burial or Cremation: _____

Funeral Director: _____ Phone: _____

Lot Owner: _____ Residence: _____

Applicant: _____ Relation to Owner: _____

Applicant Phone: _____ Email: _____

*I hereby certify that I have full legal authority to arrange for the interment of the deceased in the
aforementioned lot:*

Applicant Signature _____ Date _____

For DPW Use Only

Cemetery Superintendent Signature _____ Date _____

Type of Burial	April 1- November 30		December 1- March 31		Payment	Section 2			
	Monday- Friday	Saturday	Monday- Friday	Saturday		A1	A2	B3	B4
Full Burial	\$500	\$600	\$550	\$650					
Cremation	\$200	\$250	\$200	\$250					
						B4	B3	A2	A1
						Section 3			