

**AFFIDAVIT OF TITLE TO
BURIAL SPACE**

IDENTIFICATION OF THE PERSON COMPLETING THIS FORM:

Name: _____ Telephone: _____

Address: _____ Email: _____

STATE OF NEW YORK) ss.

COUNTY OF ERIE)

THE UNDERSIGNED, being of full age, deposes and says:

1. I am of full age, and make this Affidavit for the purpose of informing The Forest Lawn Group concerning the facts set forth herein.
2. Name(s) of original Lot Owners: _____.
3. Location of burial space in _____ Cemetery: _____.
4. My relationship to the original Lot Owners is _____.
5. The original Lot Owners are deceased and did not make any disposition of such burial space in their Last Wills and Testaments.
6. The names, residences of all direct descendants of the original Lot Owners, and their relationship to the original Lot Owners, are as follows:

Name	Relationship To Original Lot Owner	Address/Telephone/Email
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: _____, 20__

Signed: _____

Print Name:

STATE OF _____

COUNTY OF _____

On the ____ day of _____, _____ before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument, and he/she acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public