



MILTON, NEW HAMPSHIRE CEMETERY TRUSTEES

PO BOX 310

MILTON NEW HAMPSHIRE 03851

(603) 652- 4501

CERTIFICATE OF RIGHT TO INTER

KNOW ALL MEN BY THESE PRESENTS, that the TOWN OF Milton, a New Hampshire municipal corporation, with its main place of business at 424 White Mountain Hwy. Milton, County of Strafford, State of New Hampshire, by and through its CEMETERY TRUSTEES (herein GRANTORS), for consideration paid, grants to _____ with mailing address _____ (GRANTEES), a Right to Inter on certain property located in Milton Mills Cemetery, Milton Mills, County of Strafford, State of New Hampshire, said Right to Inter is further described as follows:

A Right to Inter remains in:

Row ___ North or South ___ lot(s) ___ of the designated Cemetery in said Town in accordance with the Town of Milton Cemetery Regulations and Laws of the State of New Hampshire, both as amended. The above named individual has the sole right to designate the person or persons who may be interred in said plot and to change that designation at any time in the future. The initial designation, if any, is "Appendix A" herein attached. If there is no designation, then by default these persons include the above named individual, his/her mate at the time of his/her death, and his/her children, subject to the capacity of the lot and the rules of the cemetery.

Consideration Received Right to Inter: Six hundred dollars (\$600.00) per lot.

The above named individual(s) shall resell or relinquish this right only to the Town of Milton. Upon request at the time of resale or relinquishment, the original Right to Inter fee, not including trust fund income, and recording fee, shall be refunded in accordance with the Town of Milton Cemetery Regulations and Laws of the State of New Hampshire, both as amended.

Perpetual Care funds shall be placed on deposit with the Milton Trustees of Trust Funds, the income from which may be spent for reasonable and practical care including raking, mowing and trimming of the herein specified lot(s). All general funds will be placed on deposit in the Expendable Trust Fund with the Milton Trustees of Trust Funds, these funds will be used for the entire cemetery including all lots, unsold areas of the cemetery, and such areas as lawn, roads, and shrubs and trees and fencing and tomb repairs which have been established by the cemetery.

Executed this ____ day of _____, 20____.

Name
Town of Milton
Cemetery Trustee

Name
Town of Milton
Cemetery Trustee

Name
Witness

STATE OF NEW HAMPSHIRE

COUNTY OF Strafford

On this the ____ day of _____, 20____, before me, the undersigned officer, personally appeared a majority of the elected members of the Milton, New Hampshire Cemetery Trustees, known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within instrument and acknowledged that they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

Notary Public/Justice of the Peace

My Commission Expires:_____

APPENDIX A

In accordance with the Town of Milton Cemetery Regulations, the following individuals are authorized to be interred within the specified lot(s).

In the instance that all allowed spaces are not designated, subsequent designations may be made and the Trustees shall allow additional interments in accordance with applicable Regulations and State Statutes.

Interment Designations:

lot # ____: _____
Name /Address

lot # ____: _____

lot # ____: _____

lot # ____: _____

The undersigned hereby agrees to be bound by the terms of this agreement and the Cemetery Ordinance and Regulations, as amended.

Executed this ____ day of _____, 20__.

PURCHASER'S NAME
STATE OF NEW HAMPSHIRE
COUNTY OF Strafford

On this the ____ day of _____, 20 __, before me, the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

Notary Public/Justice of the Peace
My Commission Expires: _____