

HEADSTONE PERMIT

Application for Erection of Headstone for a Deceased Service Person's Grave
Under Section 426 of the General Code of 1929, as amended

INSTRUCTIONS

1. A Deceased Service Person is defined as any soldier, sailor, marine, yeoman (f) or nurse who has served with the combative forces of the United States during any war or campaign in which the United States has been engaged and who has been honorably discharged from such periods of service, according to the records of the War or Navy Departments. (Sec. 421, General County Code of 1929, as amended).
2. Application for Allowance Toward Family Memorial, Lettering on Existing Memorial, or Concrete Base for Government Headstone shall be made by any relative or friend of the deceased service person. No applications will be given consideration unless fully completed.
3. A certified copy of the public record of death must be attached to this application, if procurable, unless same has been previously furnished to the County Executive with the application for Burial Allowance.
4. Affidavit as to the Completion of the Work is required from the contractor.

APPLICATION FOR LEHIGH COUNTY RESIDENTS

1. I (We) hereby make application for an allowance not to exceed \$100.00 (One Hundred Dollars) toward FAMILY MEMORIAL _____, LETTERING on EXISTING MEMORIAL _____, BASE for a GOVERNMENT HEADSTONE _____, on the grave of _____ whose service was as follows:

ENLISTED: Date _____ Place _____
DISCHARGED: Date _____ Place _____
Veteran was a legal resident of the State of _____ at the time of enlistment.
RANK _____ Serial Number _____
ORGANIZATIONS SERVED WITH _____
TYPE OF DISCHARGE _____

2. Given the following information about his or her death and burial:

Death: Date _____ Place _____
Burial: Date _____ Name of Cemetery _____
Location of Cemetery _____
(City _____ or Town) (Township _____ or Borough)
Location of Grave: Section _____ Range _____ Lot _____ Grave _____

3. The Veteran was born _____, at _____
4. The Veteran was a legal resident of Lehigh County at the time his/her death and lived in Lehigh County for _____ years _____ months immediately preceding death.

Signature _____
Address _____
Relation to Veteran _____
Telephone _____

CERTIFICATE OF SERVICE.

I certify that I have the proof of service of the above named veteran, and find that the statements made herein are correct, and such service during the _____ War and residence at the time of death entitles the applicant to the benefits of Sec. 426 of the General County Code of 1929, as amended

Assistant Director, Veterans Affairs

(Over)

