

ROCKVILLE CEMETERY

4219 Suisun Valley Road Fairfield, CA. 94534

(707) 864-2421

FAX (707) 864-3894

Marker Application and Authorization

Date \_\_\_\_\_

Memorial Supplier \_\_\_\_\_ Contact Person \_\_\_\_\_

Fax Number \_\_\_\_\_ Contact Number \_\_\_\_\_

Grave of \_\_\_\_\_

Section \_\_\_\_\_ Row \_\_\_\_\_ Plot/Block \_\_\_\_\_ Grave(s) \_\_\_\_\_

Date(s) of Death \_\_\_\_\_ Date(s) of Interment \_\_\_\_\_

Marker Foundation Size – Length \_\_\_\_\_ Width \_\_\_\_\_

Marker Size – Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

Base Size – Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

Type of Material: Granite or Bronze (Please Circle)

Markers must conform to the cemetery rules and regulations in effect at time of installation. Copies of rules and regulations are available at the cemetery office or online at [www.solanocemeteries.us](http://www.solanocemeteries.us)

I/We as plot owners, or next of kin, agree to the terms of the Suisun Fairfield Rockville Cemetery District rules and regulations as established or hereafter amended or enacted.

Signature of Plot Owner(s)/next of Kin: \_\_\_\_\_

Dated \_\_\_\_\_

MARKER DIAGRAM



Indicate vase location on diagram

Foundation proper size  
Proper location  
Disapproved \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cemetery approval by: \_\_\_\_\_ Title \_\_\_\_\_ Dated \_\_\_\_\_