

INTERMENT APPLICATION – IOWA VETERANS CEMETERY

Once the required documents are faxed to our office (including this completed form) you will be contacted by our staff to confirm a date and time for interment.

Interments are Monday thru Friday, with no State Holidays. Times are 9:30, 11:00, 12:30 and 2. Weekends are for KIA only.

Please fax to 515-996-9102 <input type="checkbox"/> This application	IF NOT PRE-APPROVED also fax: <input type="checkbox"/> Application for Eligibility Determination <input type="checkbox"/> Proof of Eligibility (DD214/NGB22) <input type="checkbox"/> Marriage Certificate if spouse to inter later
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DECEDENT INFORMATION

Decedent's Last Name:				First Name:				Middle Name:				Suffix:					
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Veteran <input type="checkbox"/> Dependent				Marital Status: Single/Married /Common Law/Divorced /Separated /Widowed													
Date of Birth:				Date of Death:				Social Security #:				<input type="checkbox"/> African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Other					
Address:						City:				State:		County:				ZIP:	

INTERMENT INFORMATION

**** Funeral home is responsible for lowering a privately purchased vault ****

<input type="checkbox"/> Cremated – Columbarium Wall				<input type="checkbox"/> Cremated – In Ground				<input type="checkbox"/> Ashes Scattered Elsewhere (Memorial Marker)			
<input type="checkbox"/> Casketed – IVC Liner				<input type="checkbox"/> Casketed – Private Vault Purchased: Name/Model							
Casket Size? Not to exceed: 86”L x 29 ½”W x 24”H						Size of Urn? Wall urns must fit niche space: 18”L x 9”W x 12 1/2”H					
Dimensions: _____ (L) x _____ (W) x _____ (H)						Dimensions: ____ (L) x ____ (W) x ____ (H) (Niche can hold 2 urns)					

Spouse to Inter Later: <input type="checkbox"/> Yes <input type="checkbox"/> No		Spouse will be: <input type="checkbox"/> Casketed <input type="checkbox"/> Cremated		Spouse is a veteran: <input type="checkbox"/> Yes* <input type="checkbox"/> No		*If yes, proof of eligibility: <input type="checkbox"/> Yes <input type="checkbox"/> No		Marriage Cert: <input type="checkbox"/> Yes <input type="checkbox"/> No	
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Brief Eulogy/Words of remembrance by:							Pallbearers for casket? <input type="checkbox"/> Yes				
<input type="checkbox"/> Minister <input type="checkbox"/> Chaplain <input type="checkbox"/> Friend <input type="checkbox"/> Family Member <input type="checkbox"/> Family requests none							<input type="checkbox"/> No (IVC staff to assist)				

MILITARY FUNERAL HONORS (VETERANS ONLY)

Funeral Director has contacted the:											
<input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> Marine Corps <input type="checkbox"/> Coast Guard <input type="checkbox"/> Family is not requesting Military Honors											
Funeral Director has arranged for: Firing Detail: <input type="checkbox"/> Yes (Who?) _____ <input type="checkbox"/> No <input type="checkbox"/> None Requested											
Patriot Riders: <input type="checkbox"/> Yes <input type="checkbox"/> No						Bagpiper: <input type="checkbox"/> Yes <input type="checkbox"/> No					

NEXT-OF-KIN INFORMATION

Last Name:				First Name:				Middle Name:				Date of Birth:					
Address:						City:				State:		County:				ZIP:	

Home Phone:						Email Address:					
Cell Phone:											

Relationship to Decedent: <input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Child <input type="checkbox"/> Other Relative <input type="checkbox"/> Non-Relative											
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FUNERAL HOME INFORMATION

Name of Funeral Home:						Funeral Director:											
Address:						City:				State:		County:				ZIP:	
Office Phone:						Office Fax:						Director's Cell:					

- If decedent is NOT a veteran, there is a \$300 fee* assessed, payable day of service *(Fee subject to change)
- The committal service at Iowa Veterans Cemetery is a **graveside service only**. Approximate time in the Committal Shelter is **15-20 minutes**. This includes military honors.