



Garden Permit Application

Please return your completed application to your cemetery office.



The Garden Permit Program allows for the planting of flowers in front of raised* headstones giving family members the ability to care for the final resting place of their loved one(s). These gardens are permitted under controlled circumstances and only where the spacing of the headstones allows for access of equipment. We offer two options. Our standard program includes the basic landscape border. Our prime program is an upgrade and offers an enhanced border.

The program is annual and begins every March 21st. The annual fee must be paid each year before March 15th in order to keep your permit active. For new applicants, upon application and approval, cemetery staff will install borders along with mulch within one week, but not before March 21. For safety reasons, no landscaping stones are permitted.

Families are permitted to plant annuals and place objects within the boundary of the installed border throughout the year. The permit holder is responsible for caring for the flowers within the border including removal at the end of the growing season. We reserve the right to trim or remove flowers that become unsightly or cascade over the border. Families must still respect the sacred environment by refraining from placing anything that may be offensive to Catholic teachings. The border may **NOT** be moved or replaced by anyone other than cemetery staff.

Under normal landscaping activity, items within the border will not be moved or impacted. However, items within the border may be moved for access of burial equipment to other graves in the vicinity. Cemetery staff will replace objects within the border once it is put back in place, but take no responsibility for emulating the layout of objects that were disturbed.

The cemetery takes **NO** responsibility for objects and plantings that are removed or affected by visitors to the cemetery. Families are encouraged to refrain from placing objects of value or that cannot be easily replaced.

** Not applicable on flat markers.*

****Application Submitted By:** _____

Name of Deceased: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Cemetery Name: _____

Location Description: _____

Please select the program option by checking one of the boxes and submitting payment for the selected program:

\$35 Garden Permit Program (standard border) \$50 Garden Permit Program Prime (enhanced border)

Customer Signature: _____

***Note: Applicant must obtain permission from the monument owner(s) or their heir(s). Customer signature indicates that they have obtained permission from the monument owner(s) or their heir(s), and that they will abide by the rules and regulations of South Jersey Catholic Cemeteries.*

Please return your completed form along with your check payable to your cemetery office.

For Office Use Only:

HMIS Entry: _____ Contract #: _____

Date Installed: _____ By: _____

Method of Payment: Check Credit Card Debit Card Money Order