Arlington Cemetery Assn.

AFFIDAVIT OF HEIRSHIP

STATE OF _____}
SS.:
COUNTY OF_____}

_____of full age, being duly sworn according to law, upon her oath deposes and says:

I reside _____and am a spouse/child/other_____ of _____, deceased.

Decedent died on the _____ day of _____, a resident of _____, and was interred in _____, located at _____. A copy of their death certificate is hereto annexed and hereof made a part, if decedent was interred in a cemetery other than Arlington.

Decedent died on the _____ day of _____, a resident of _____, and was interred in _____, located at _____. A copy of their death certificate is hereto annexed and hereof made a part, if decedent was interred in a cemetery other than Arlington.

Decedent, at the time of their death was the owner of the following burial space in Arlington Cemetery in Kearny, Hudson County, NJ to wit:

Section: Row or Lot#: Grave(s) #: DEED #:

Decedent left surviving as their sole heir at law the following, whose respective age, residence and relationship to decedent are as follows (use back of form for additional space):
NAME: AGE: RESIDENCE: RELATIONSHIP:

Except as hereinbefore otherwise stated, decedent did not leave surviving any child or children, either natural born or adopted, or any descendant of any deceased, natural born, or adopted children.

The Statements herein contained are true, and are made to induce ARLINGTON CEMETERY ASSOCIATION of KEARNY, NJ, owner and operator of ARLINGTON CEMETERY to rely thereon, deponent knowing full well that in reliance thereon and will recognize the heirs mentioned in paragraph five hereof as the sole heirs.

Sworn and Subscribed to Before Me
On this _____
Day of _____, 20____

_____
Filer's Signature

_____
A Notary Public
Of the State of _____
(Affix Notary Seal and Stamp)