

**MONTANA STATE VETERANS CEMETERIES
APPLICATION FOR INTERMENT REQUEST**



DECEDENT'S INFORMATION

Status (circle): Retiree Veteran Active Duty/KIA Spouse Dependent
Last Name: _____ First: _____ Middle or Initial: _____
SSN: _____ Date of Birth: _____ Date of Death: _____
Marital Status (circle): Married Single/Widow(ed) Divorced Legally Separated Common-Law-Marriage
Interment Type: Casket Cremation In-Ground Cremation Niche Wall IMO (In Memory Of)
State of Residence: _____ County of Residence: _____
Has the Decedent ever been convicted of a state or federal capital crime or a sex offender? Yes No
Is the spouse already interred in this cemetery? Yes No n/a
If not, will spouse be interred in this cemetery? Yes No n/a
If yes, please provide their name: _____
Preferred date/time of Service: _____

VETERAN'S SERVICE RECORD (Form DD-214, NGB 22, DD-1300, or equivalent document MUST be attached)

Last Name: _____ First: _____ Middle: _____ SSN: _____
Branch of Service: _____ Highest Rank: _____
Date of Entry: _____ Date of Separation/Retirement: _____

CONTACT INFORMATION / NEXT-OF-KIN

Last Name: _____ First: _____ Middle or Initial: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (_____) _____ Email: _____
Relationship to Decedent: _____

FUNERAL HOME INFORMATION

Name: _____ Representative: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (_____) _____ Email: _____

AUTHORIZATION

I certify that to the best of my knowledge that all the information provided is true and correct.

Printed Name: _____

Signature: _____ Date: _____

This form must be received by the cemetery office before an interment can be scheduled

Eastern Montana State Veterans Cemetery, P.O. Box 1741, Miles City, MT 59301
khollmund@mt.gov | Phone (406) 218-2945 | Fax (406) 323-2019

Montana State Veterans Cemetery, P.O. Box 76, Fort Harrison, MT 59636
aaron.ward@mt.gov | Phone (406) 324-4793 | Fax (406) 417-3301

Western Montana State Veterans Cemetery, 1911 Tower Street, Missoula, MT 59804
jeremy.millert@mt.gov | Phone (406) 721-2995 | Fax (406) 543-2360