AGREEMENT FOR DEPENDENT BURIAL

This agreement is made on DATE _______________________ by NOK/POA.

I understand the basis for eligibility of a dependent for interment in a North Carolina State Veterans Cemetery is based on the relationship (spouse, son, daughter) of the veteran as well as other qualifying factors established under Article 8A, Chapter 65 of the General Statutes of North Carolina.

I also understand that in effecting the interment of the remains of my eligible dependent, I elect and intend to be buried in determined gravesite.

Now, therefore, in consideration of the interment of the remains of DECEDENT in the Eastern Carolina State Veterans Cemetery, Goldsboro, North Carolina:

I agree:

1. That my remains shall be buried in the determined gravesite.
2. That should I subsequently decide that my remains should be interred elsewhere that the determined gravesite as my aforementioned dependent, then the remains of said dependent shall be removed from the State Veterans Cemetery without cost to the State of North Carolina.
3. That, if after my death, my next of kin, executor or administrator should for any reason not have my remains interred in the determined grave as that of my said dependent, or if this agreement becomes unenforceable for any reason, then my next of kin, executor or administrator will remove the remains of my said dependent from the State Veterans Cemetery without cost to the State of North Carolina.

I declare that these are my expressed wishes and that my executor or administrator will fulfill the aforementioned requests and desires and see that my remains are permanently in the determined gravesite as my said dependent.

Signature: ________________________________________________

Copy/Paste Here NoK/PoA Information:

In the presence of: ________________________________________

(Signature of Witness)