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. Office hours are Mon – Fri, 8 a.m. – 4:30 p.m., excluding state holidays. Interments are Monday thru Friday, with no state holidays. Times are 9:30, 11:00, 12:30 and 2. Weekends are for KIA only.

IF NOT PRE-APPROVED also fax: □ Application for Eligibility Determination Please fax to 515-996-9102 ☐ Proof of Eligibility (DD214/NGB22) ☐ Marriage Certificate if spouse to inter later ☐ This application DECEDENT INFORMATION Decedent's Last Name: First Name: Middle Name: □Male □Female □Veteran □Dependent Marital Status: Single/Married /Common Law/Divorced /Separated /Widowed Date of Death: Social Security #: □African American Date of Birth: □Caucasian □Hispanic □Asian □Other ZIP: Address: City: State: County: INTERMENT INFORMATION ** Funeral home is responsible for lowering a privately purchased vault ** □Cremated – Columbarium Wall □Cremated – In Ground □Ashes Scattered Elsewhere (Memorial Marker) □Casketed – IVC Liner □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"H Dimensions: ____(L) x ____(W) x ____(H) (Niche can hold 2 urns) Dimensions: _____(L) x _____(W) x _____(H) Spouse is a veteran: *If yes, proof of eligibility: Marriage Cert: Spouse to Inter Later: Spouse will be: □Yes $\sqcap No$ □Casketed □Cremated □Yes* □Yes □No □Yes □No Brief Eulogy/Words of remembrance by: Pallbearers for casket? □Yes □Minister □Chaplain □Friend □Family Member □Family requests none □No (IVC staff to assist) MILITARY FUNERAL HONORS (VETERANS ONLY) Funeral Director has contacted the: □Army □Navy □Air Force □Marine Corps □Coast Guard □Family is not requesting Military Honors □None Requested ⊓No Patriot Riders: □Yes Bagpiper: □Yes □No **NEXT-OF-KIN INFORMATION** Middle Name: Date of Birth: Last Name: First Name: Address: City: State: County: ZIP: Home Phone: Email Address: Cell Phone: Relationship to Decedent: □Spouse □Parent □Sibling □Child □Other Relative ¬Non-Relative **FUNERAL HOME INFORMATION** Funeral Director: Name of Funeral Home: City: ZIP: Address: State: County: 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 the equivalent of a *graveside service*. Approximate time in the Committal Shelter (including military honors) is **15-20 minutes**. **Caskets may not be opened at cemetery.**