

13389 Mountain Rd.
Glen Allen, VA 23059
Cemetery License No.
4901000037



roselawnmemorygardens.com
roselawnva@gmail.com
804-798-6496

MEMORIAL AGREEMENT

ACCOUNT #: _____

This agreement made this _____ day of _____, 2022, between Roselawn Memory Gardens and:

PURCHASER: _____ PHONE #: _____

ADDRESS: _____

DESIGN: _____ SIZE: _____ VASE NAME: _____

GRANITE FOUNDATION SIZE: _____ X _____; COLOR: _____ LETTER STYLE: _____

EMBLEMS(S) #1: _____ #2: _____

#3: _____

4 WORDS OF ENDEARMENT (OVER 4, ADDITIONAL COST): _____

SCROLLS: YEAR DATE TABS MONTH/DAY/YEAR SCROLL (CIRCLE ONE)

****IF THIS AGREEMENT IS SENT TO PURCHASER EITHER BY US POSTAL SERVICE OR EMAIL, YOU HAVE UP TO TWENTY (20) DAYS TO RETURN THE COMPLETED AGREEMENT AND PAYMENT FROM THE AGREEMENT DATE, OR PRICES QUOTED MAY CHANGE.**

NAME(S) ON THE MEMORIAL: #1: _____ INITIAL PLEASE: _____

#2: _____ INITIAL PLEASE: _____

LOCATION OF DECEASED: GARDEN # _____ SECTION # _____ GRAVE ID # _____

RENDERING PRESENTED AND SIGNED FOR APPROVAL: YES
IF RENDERING IS NOT AVAILABLE, REFER TO THE ORDER FORM FOR DETAILS

MEMORIAL & GRANITE..... \$ _____

VASE, if separate piece, OR SIGNATURE..... \$ _____

“EIB” PORTRAIT..... \$ _____

ADDITIONAL WORDS OVER 4..... \$ _____

LOOSE SCROLL..... \$ _____

PRODUCTION SURCHARGE..... \$ _____

ACCT #: _____ LAST NAME OF PURCHASER: _____

CUSTOM WORK \$ _____
RETAIL SALES TAX.....\$ _____ VA
TRANSPORTATION TAX.....\$ _____
INSTALLATION.....\$ _____
SHIPPING/ HANDLING.....\$ _____
ADMINISTRATION FEE.....\$ _____
TOTAL.....\$ _____
DOWNPAYMENT****.....\$ _____
CHECK # _____
AMOUNT PAID BY CREDIT OR DEBIT \$ _____
MONEY ORDER # _____
4% CREDIT CARD FEE\$ _____
TOTAL CHARGED.....\$ _____
BALANCE DUE:\$ _____
AMT. TAXABLE: _____ AMOUNT NOT TAXED: _____ ON REC.: _____

CREDIT CARD FEE: THE USE OF A CREDIT OR DEBIT CARD WILL INCUR ADDITIONAL 4% FEE ON THE AMOUNT PROCESSED AT THAT TIME. IF AFTER 50 DAYS, THE ACCOUNT IS CANCELED OR VOIDED, THE FEE CHARGED WILL NOT BE REFUNDED TO THE PURCHASER.

FUNDS TO BE PLACED IN THE PRE NEED MERCHANDISE TRUST:
ROSELAWN HAS SUSPENDED OUR PRE NEED SALES PROGRAM.

CANCELTION RIGHTS: FOR IN HOME SALES ONLY.

COMPLAINTS AND CONTACTING THE CEMETERY BOARD: The Virginia Cemetery Board is responsible for regulating and investigating consumer complaints against cemetery operators. You may contact the Cemetery Board by:

MAIL: Cemetery Board
C/O DPOR
9960 Mayland Dr., Suite 400
Richmond, VA 23233

EMAIL: cemetery@dpor.virginia.gov
phone: 804-367-2039

ACCT #: _____ LAST NAME OF PURCHASER: _____

I HAVE BEEN OFFERED: INITIAL, PLEASE

a General Price List _____ Payment Plans _____

INITIAL PLEASE: _____

I SIGNED THIS AGREEMENT ON (date) _____ AND ALL APPLICABLE
BLANKS WERE FILLED AND I ACKNOWLEDGE THAT I RECEIVED A COPY OF THE AGREEMENT.

PURCHASER

PURCHASER

DATE: _____

ROSELAWN REPRESENTATIVE
SCOTT N. MORGAN DPOR #4903-0012210
E. GASSMAN DPOR #4903-0012219
EDWINA FERGUSON DPOR #4903-013100

OFFICE USE:

Rev. 10/21/08 8/20/2019 6/2020 4/8/2021 6/7/2021 9/25/2022