

**Town of Wascott**  
P.O. Box 159, Wascott, WI 54890  
Phone: 1-715-466-4252  
wascott@centurytel.net

**CEMETERY DEED**

Enter your information in the fields below then print, sign  
and return the form using the email address or the PO address above.

The Town of Wascott, WI, for consideration of \$\_\_\_\_\_ conveys to\_\_\_\_\_

further referred to in this deed as Grantee, subject to conditions set forth below, the following described grave space or spaces  
in the Wascott Cemetery of the Town of Wascott, Douglas County, Wisconsin:

**Section**\_\_\_\_\_, **Row**\_\_\_\_\_, **Lot**\_\_\_\_\_, **Site**\_\_\_\_\_ as designated, numbered and described on the official  
plat on file with the Clerk of the Town of Wascott, Douglas County, Wisconsin.

**Grantee's Address**

\_\_\_\_\_

**Grantee's Heir and Address**

\_\_\_\_\_

**CONDITIONS**

This conveyance is subject to the following conditions:

1. No transfer of grave space or spaces may be made to anyone except the Town of Wascott, who may accept such assignment or transfer in its sole discretion.
2. No curbing enclosing the grave space, or groups of grave spaces, shall ever be constructed, and other improvements to the space shall not be made unless consented to in writing the Town of Wascott Supervisors.
3. No grave shall be dug without the express permission of the Town of Wascott.
4. Grantee, and Grantee's representatives and heirs, by the acceptance of this deed, agree to comply with any and all of the rules and regulations governing the conduct and operation of this cemetery, which may be imposed by the Town of Wascott.

**AGREEMENT BY TOWN FOR UPKEEP**

The Town of Wascott, in consideration of the payment above mentioned, and the acceptance of the above conditions by the Grantee, agrees to maintain the space or spaces in a neat and orderly condition and to properly care for such space or spaces.

**Signed**\_\_\_\_\_

Town of Wascott Clerk

**Date**\_\_\_\_\_