

**DEATH MATURITY
APPLICATION FOR WITHDRAWAL
OF TRUST-FUNDED PREPAID FUNERAL CONTRACT**

PERMIT NUMBER _____

Prepaid Funeral Contract No. _____

Principal on Deposit \$ _____ Accrued Interest \$ _____ **Grand Total** \$ _____

_____, called SELLER, hereby advises
_____, called DEPOSITORY, that
_____, contract beneficiary of the above contract with SELLER, has died or the
purchaser assigned this funeral contract for the use of * _____, who has died. A photocopy of
the certified death certificate of such beneficiary and a copy of the prepaid funeral benefit contract is attached hereto.
SELLER requests the Depository for such funds, to pay SELLER all funds credited to such purchaser as set out above
under said contract, and SELLER agrees that all such funds so paid will be used exclusively toward payment for the
funeral of said contract beneficiary.

* _____
Signature of Purchaser, if applicable

Seller's Firm Name (Permit Holder)

Signature of Seller's Approved Designated Agent

Date

Printed Name and Title of Seller's Approved Designated Agent

TO: Depository

A photocopy of the certified death certificate of the above deceased, a copy of the prepaid funeral benefit contract, and an executed copy of this form must be furnished and request made by Seller that the balance on deposit as set out above, plus any accrued interest, be paid over to it, and you are hereby authorized and directed to make such payment.

***If** the contract is to be assigned by the purchaser for the funeral of another individual that is not designated in the contract, then the purchaser **must** sign where indicated.

(Revised 02/09)