BCGS BURIAL PROJECT
Name of Cemetery:

_____

Map Location (Baltimore County- ADC): Page and Grid (alpha-numeric (i.e. B-8))
Page #_____   Grid ____ - _____

Address:
Street1_____
Street2_____
City/town_____   zip code __ __ __ __ __

Directions:_____
_____
_____
_____
_____
_____

GPS Coordinates: [metric EGM2008 standard]
N N . N N N N N N , - N N . N N N N N N
__ __ . __ __ __ __ __ __ , - __ __ . __ __ __ __ __ __
Google Earth/Maps can be used if a GPS device is not available.

Accessibility (Permission to Inspect):
_____
_____

Owner's Name & Phone Number:
_____
_____
_____

Condition (Fenced, Mowed, Overgrown, Vandalized, etc.):
_____
_____

*Approx No of Graves: _____
Year of Earliest/Latest Graves: _____

*History:
_____
_____
_____
_____
_____
_____
_____
_____
_____ **[over]**

History: (continued)

_____
_____
_____
_____
_____
_____
_____
_____
_____

*Further Comments: known publications & their location, URLs or links, etc)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

NOTES: Cemeteries/Burials may be independent, commercial, related to a Place of Worship or a Family plot. If a Columbarium is located within a Place of Worship, so note.

If **name** is unknown, assign a name; family surname, multiple family names, church name, subdivision name or street name. If a cemetery has been moved; note former and latter locations. For large independent or commercial cemeteries, give address of Entrance.

It is important to obtain permission to inspect a cemetery; otherwise you may be trespassing. Get acquainted with the owner, he/she may help you!

Pictures: Multiple high quality pictures are important. Images from the road, entrance to the site, notable nearby visible landmarks (power lines, bldgs., etc), and views of the Cemetery. Please capture at least 4 to 6 pictures please. Label/name each picture carefully including the date.
Thank you!

THE BALTIMORE COUNTY GENEALOGICAL SOCIETY BURIAL PROJECT.

Submitter: _____

     Tel #: _____

        Email: _____

          Date:_____

                            Db entered: _____

                            Map posted: _____

                            Record filed: _____