

14B

FORT BEND COUNTY FY 2010
COMMISSIONERS COURT AGENDA REQUEST FORM

AGENDA ITEM

Return Completed Form by E-Mail to: Agenda Coordinator, County Judge's Office

Date Submitted: 6/10/10

Submitted By: Hopie Solomon

Department: 6451 Social Services

Court Agenda Date: 6/22/10

Phone Number: Ext. 3506

SUMMARY OF ITEM: Approve and sign plot owner consent forms granting permission for the disinterment of three paupers as requested by Carnes Funeral Service.

RENEWAL AGREEMENT/APPOINTMENT

YES

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NO

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REVIEWED BY COUNTY ATTORNEY'S OFFICE:

YES

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NO

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List Supporting Documents Attached: *Forms to be signed.*

FINANCIAL SUMMARY:

BUDGETED ITEM: YES

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NO

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FUNDNG SOURCE: Accounting Unit: 100645100
 Activity (If Applicable):

Account Number: 63000

DESCRIPTION OF LAWSON ACCOUNT: _____

Instructions to submit Agenda Request Form:

- Completely fill out agenda form: incomplete forms will not be processed.
- Agenda Request Forms should be submitted by e-mail, fax, or inter-office mail, and all back-up information must be provided by Wednesday at 2:00 p.m. to all those listed below.
- All original back-up must be received in the County Judge's Office by 2:00 p.m. on Wednesday.

DISTRIBUTION:

Original Form Submitted with back up to County Judge's Office ☐ (✓ when completed)

If by E-Mail to ospindon@co.fort-bend.tx.us

If by Fax to (281) 341-8609

Distribute copies with back-up to all listed below. If by fax, send to numbers below:

<input type="checkbox"/> Auditor (281-341-3774)	<input type="checkbox"/> Comm. Pct. 1 (281-342-0587)
<input type="checkbox"/> Budget Officer (281-344-3954)	<input type="checkbox"/> Comm. Pct. 2 (281-403-8009)
<input type="checkbox"/> Facilities/Planning (281-633-7022)	<input type="checkbox"/> Comm. Pct. 3 (281-242-9060)
<input type="checkbox"/> Purchasing Agent (281-341-8642)	<input type="checkbox"/> Comm. Pct. 4 (281-980-9077)
<input type="checkbox"/> Information Technology (281-341-4526)	<input type="checkbox"/> County Clerk (281-341-8697)
<input type="checkbox"/> Other:	<input type="checkbox"/> County Atty (281-341-4557)

RECOMMENDATION / ACTION REQUESTED:

Special Handling Requested (specify):

6-24-10 copy received

CEMETERY CONSENT FORM

I (We) hereby give our consent for the disinterment and removal of
RAMIRO CORADO ARGUETA who is buried in 33 - 0 - sp 11
 (Name of Deceased) (Plot & Block)
 Our records indicate that the plot owner(s) is/are _____

Signature

Date

Fr. Bend Social Services
 Title

Cascoens Stafford Cemetery
 Name of Cemetery

PLOT OWNER CONSENT FORM

I (We) hereby certify that we are the owner(s) of record 33 - 0 - sp 11
 (Plot)
 in Stafford Tx. either by purchase or inheritance and we hereby
 give our permission of the disinterment of Ramiro Argueta who is buried
 in that plot.

Signature of Owner

Date

Robert Hebert 6-22-2010
 Fort Bend County-Robert Hebert, County Judge

Address

Phone Number

NEXT-OF-KIN CONSENT FORM

I hereby certify that I am the Wife of Ramiro Corado Argueta
 (Relationship) (Name of Deceased)
 There are no other living relatives that precede me in the degree of kindred; and I give my
 permission for the body to be disinterred and moved to Panteon Municipal, Santa Catarina,
 (Name of Cemetery Where Body is to be Reinterred) Guatemala

Signature

Date

March 1st 2010

CEMETERY CONSENT FORM

I (We) hereby give our consent for the disinterment and removal of Leticia Leiva-Royes who is buried in 33 Row 0 Sp 08
(Name of Deceased) (Plot & Block)
Our records indicate that the plot owner(s) is/are Fort Bend County, Tx

X
Signature Date

Title

Stafford Cemetery
Name of Cemetery

PLOT OWNER CONSENT FORM

I (We) hereby certify that we are the owner(s) of record 33 Row 0 Sp 08
(Plot)
in Stafford, Tx either by purchase or inheritance and we hereby
give our permission of the disinterment of Leticia Leiva-Royes who is buried
in that plot.

X Robert Hebert 6-22-2010
Signature of Owner Date

Fort Bend County - Robert Hebert, County Judge

Address

Phone Number

NEXT-OF-KIN CONSENT FORM

I hereby certify that I am the Father of X Leticia Leiva-Royes
(Relationship) (Name of Deceased)

There are no other living relatives that precede me in the degree of kindred; and I give my
permission for the body to be disinterred and moved to to Cremated

(Name of Cemetery Where Body is to be Interred)

X Ramon Daniel Lewis
Signature Date

CEMETERY CONSENT FORM

I (We) hereby give our consent for the disinterment and removal of
Roger Ivan Carbajal who is buried in 33-0-Sp 09
(Name of Deceased) (Plot & Block)
Our records indicate that the plot owner(s) is/are Pl. Bend County, Tx.

Signature Date

Title
Crown Stafford Cemetery
Name of Cemetery

PLOT OWNER CONSENT FORM

I (We) hereby certify that we are the owner(s) of record 33-0-Sp 09
in Stafford Tx either by purchase or inheritance and we hereby
give our permission of the disinterment of Roger Ivan Carbajal who is buried
in that plot.

Robert Hebert 6-22-2010
Signature of Owner Date
Fort Bend County - Robert Hebert, County Judge

Address

Phone Number

NEXT-OF-KIN CONSENT FORM

I hereby certify that I am the Father of Roger Ivan Carbajal
(Relationship) (Name of Deceased)
There are no other living relatives that precede me in the degree of kindred; and I give my
permission for the body to be disinterred and moved to Panteon Municipal, Morazan Yoro,
(Name of Cemetery Where Body is to be Interred) Honduras

Roger Ivan Carbajal
Signature Date