

## REQUEST FOR BURIAL DETAIL (ARMY PERSONNEL ONLY)

1. Name of Funeral Director: \_\_\_\_\_

2. Date/Time of sending Request: \_\_\_\_\_

3. Deceased's Name/Rank: \_\_\_\_\_

4. Social Security # of Deceased: \_\_\_\_\_

5. Funeral Home: NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

6. Interment: TIME \_\_\_\_\_ DATE/DAY \_\_\_\_\_

Cemetery: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(CITY, STATE, ZIP CODE)

PHONE NUMBER \_\_\_\_\_ COUNTY: \_\_\_\_\_

7. NEXT OF KIN \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS OF NOK \_\_\_\_\_

### FUNERAL DIRECTIONS:

In addition to submitting this Military Honors Request Form and the appropriate discharge paperwork via facsimile transmission, a representative from your establishment **MUST** telephonically contact this office to confirm receipt. If casualty personnel cannot be contacted, please leave a voice mail message and a casualty office representative will contact you as soon as possible. Military Funeral Honors **MUST** be submitted at least **48 hours prior to actual interment.** This office cannot guarantee Military Honors on those requests received by this office with less than 48 hours notice. It is extremely critical that all items of information be provided. **Special emphasis must be placed on providing a complete address (physical address, not mailing address) of the cemetery or interment site.**

### **FORT DIX CASUALTY OFFICE, PHONE NUMBERS:**

Office: (609) 562-4453 / 3147 Fax: (609) 562-2139

**DO NOT FORGET TO FAX DD 214 OR PROOF OF HONORABLE SERVICE**