## **DEPARTMENT OF VETERANS AFFAIRS**



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Please complete the attached Gravesite Reservation Questionnaire by providing the fo	ollowing information:
-If you are replying on behalf of a Reservation Holder who is incapacitated, please i	indicate that in Block 5.
-If NCA did not send this letter to the Reservation Holder's current mailing address,	please provide an updated address in Block 6.
-Mark your intent to keep or relenquish the reserved gravesite in Block 7.	
-If you are replying on behalf of a Reservation Holder because they are deceased, pl	lease indicate that in Block 8.
Once you have completed the form – to include signing and dating it in Blocks 10 an the postage-paid envelope so that NCA can update its records. If you do not reply, No you for your prompt response.	
NOTE: Prior versions of this letter indicated that remarried spouses were not eligible changed. Surviving spouses who remarried and whose date of death is on or after Jan VA national cemetery.	
Contact the national cemetery listed above if you have questions. Contact information Affairs national cemeteries is available online at <a href="https://www.cem.va.gov/cem/cems/FL40-40">https://www.cem.va.gov/cem/cems/FL40-40</a> OCT 2020 (RS)  DETACH HERE	
<u> </u>	OMB No. 2900-0546 Expiration Date: Sep. 30, 2020 Respondent Burden: 10 minutes

U.S. Department of Veterans Affairs **GRAVESITE RESERVATION QUESTIONNAIRE (2 YEAR)** 2. SSN/C/SERVICE NO. 1. NAME 3. SECTION 4. GRAVE IF YOUR ADDRESS CHANGED, INDICATE THE CURRENT ADDRESS BELOW IN BLOCK 6. 5. ADDITIONAL INFORMATION 6. ADDRESS (Street, City, State and Zip Code) I AM THE INDIVIDUAL LISTED IN BLOCK 1. I AM REPLYING ON BEHALF OF THE INDIVIDUAL LISTED IN BLOCK 1. MY RELATIONSHIP TO THE INDIVIDUAL LISTED IN BLOCK 1 IS: (Spouse, Child, Aunt, Friend, etc.) 8. IS THE INDIVIDUAL IN BLOCK 1 DECEASED? (If yes, what is the 7. PLEASE CHECK THE APPROPRIATE BOX BELOW disposition of remains (scattered, buried in a private cemetery, etc.) YES, I WISH TO RETAIN THE RESERVED GRAVESITE YES NO, I DO NOT WISH TO RETAIN THE RESERVED GRAVESITE NO 9. PRINT NAME 10. SIGNATURE 11. DATE 12. PHONE NUMBER (Include Area Code) VA may not conduct or sponsor, and you are not required to respond to this form letter unless it displays a valid OMB Control Number 2900-0546. Chapter 24, Title 38, United States Code allows VA to determine if individuals holding gravesite reservations in national cemeteries wish to retain the reservation and whether their eligibility for the reservation has been affected. Responding to this questionnaire is required to retain your benefit; failure to provide the information may result in cancellation of the gravesite reservation. The information you provide may be disclosed outside VA as permitted by law or as stated in the "Notices of Systems of VA Records" published in the Federal Register in accordance with the Privacy Act of 1974 as "Veterans and Dependents National Cemetery Interment Records VA" (42VA41).

**RESPONDENT BURDEN**: Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the VA Clearance Officer (005R1B), 810 Vermont Avenue, NW, Washington, D.C., 20420. SEND COMMENTS ONLY. DO NOT SEND THIS FORM OR REQUEST FOR BENEFITS TO THIS ADDRESS.

**BACK OF FL** 40-40, OCT 2020 (RS)