



DEPARTMENT OF VETERANS AFFAIRS

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You are receiving this letter because \_\_\_\_\_, referred to in this letter as the Reservation Holder, has a reserved gravesite in \_\_\_\_\_, at Gravesite \_\_\_\_\_ in Section \_\_\_\_\_. The only person authorized to use this gravesite is the Reservation Holder. The National Cemetery Administration (NCA) is required to keep an accurate account of reserved gravesites and to make them available to other individuals if the Reservation Holder no longer needs the gravesite.

Please complete the attached Gravesite Reservation Questionnaire by providing the following information:

- If you are replying on behalf of a Reservation Holder who is incapacitated, please 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, please indicate that in Block 8.

Once you have completed the form – to include signing and dating it in Blocks 10 and 11 – please detach and return it using the postage-paid envelope so that NCA can update its records. If you do not reply, NCA may cancel the reservation. Thank you for your prompt response.

NOTE: Prior versions of this letter indicated that remarried spouses were not eligible for burial. However, in 2003 the law changed. Surviving spouses who remarried and whose date of death is on or after January 1, 2000, are eligible for burial in any VA national cemetery.

Contact the national cemetery listed above if you have questions. Contact information for Department of Veterans Affairs national cemeteries is available online at <https://www.cem.va.gov/cem/cems/allnational.asp>.

FL 40-40  
NOV 2020 (RS)

DETACH HERE

OMB No. 2900-0546  
Expiration Date: Nov. 30, 2023  
Respondent Burden: 10 minutes

<b>VA</b> U.S. Department of Veterans Affairs		<b>GRAVESITE RESERVATION QUESTIONNAIRE (2 YEAR)</b>	
1. NAME	2. SSN/C/SERVICE NO.	3. SECTION	4. GRAVE
<b>IF YOUR ADDRESS CHANGED, INDICATE THE CURRENT ADDRESS BELOW IN BLOCK 6.</b>			
5. ADDITIONAL INFORMATION <input type="checkbox"/> I AM THE INDIVIDUAL LISTED IN BLOCK 1. <input type="checkbox"/> I AM REPLYING ON BEHALF OF THE INDIVIDUAL LISTED IN BLOCK 1. MY RELATIONSHIP TO THE INDIVIDUAL LISTED IN BLOCK 1 IS: <i>(Spouse, Child, Aunt, Friend, etc.)</i> _____		6. ADDRESS <i>(Street, City, State and Zip Code)</i>	
7. PLEASE CHECK THE APPROPRIATE BOX BELOW <input type="checkbox"/> YES, I WISH TO RETAIN THE RESERVED GRAVESITE <input type="checkbox"/> NO, I DO NOT WISH TO RETAIN THE RESERVED GRAVESITE		8. IS THE INDIVIDUAL IN BLOCK 1 DECEASED? <i>(If yes, what is the disposition of remains (scattered, buried in a private cemetery, etc.)</i> <input type="checkbox"/> YES _____ <input type="checkbox"/> NO _____	
9. PRINT NAME	10. SIGNATURE	11. DATE	12. PHONE NUMBER <i>(Include Area Code)</i>

FL 40-40  
SEP 2023 (RS)

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 reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. VA may not conduct or sponsor, and you are not required to respond to this collection of information unless it displays a valid OMB number. Send comments regarding the burden estimate or any other aspects of this collection of information, including suggestions for reducing the burden to OIRA Desk Officer for VA, 725 17th St NW, Washington, DC 20503. SEND COMMENTS ONLY. DO NOT SEND THIS FORM OR REQUEST FOR BENEFITS TO THIS ADDRESS.

BACK OF FL 40-40, SEP 2023 (RS)