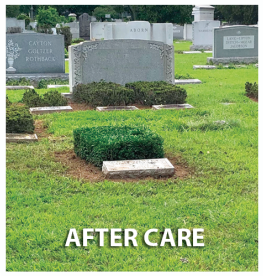

Seasonal Grave Care Landscaping Service. . .

because caring for your loved one never ends.

Comfort and convenience of reliable & detailed landscaping

Your mitzvah & tribute for a very special person

Call now to enroll in Seasonal Care service

(201) 843-7600

www.riversidecemetery.org

Seasonal Care

(201) 843-7600

12 Market Street
Saddle Brook, NJ 07663

info@riversidecemetery.org

www.riversidecemetery.org

Office hours
Monday-Friday 8am-4pm
Sunday 8am-1pm

Grounds open
office closed
Saturday 10am-5pm

RIVERSIDE CEMETERY
Exclusively Jewish
Saddle Brook, New Jersey
Est. 1906

SEASONAL CARE

(201) 843-7600

www.riversidecemetery.org

Seasonal Care

A small annual payment that covers maintenance of the gravesite for the current year.

Weeding and Trimming

Our highly experienced landscaping professionals will weed and trim your gravebed of shrubs approximately every 7 weeks during the growing season: mid-April through mid-October.

Topsoil and Grass Seed

If your gravesite has no plantings, we trim around the monument and add topsoil and grass seed as needed.

Grave Plantings

A bed of boxwood shrubs which remain green year-round is available at minimal cost.

Enrollment and Billing

Seasonal Care invoices are mailed for new interments at the start of the following growing season. If Seasonal Care has not been paid for 3 or more years, we will inspect the grave to determine an initial clean-up fee. This fee is required for reenrollment.

Exclusions

Seasonal Care does not provide for the initial plantings, replacement plantings or monument cleaning or leveling.

Prices valid through October 31, 2026

Seasonal Care Enrollment Form

Lock in current rates!

☐ **3 years** of Seasonal Care for $504 per grave
Enjoy three years of care. Greatest savings!

☐ **2 years** of Seasonal Care for $336 per grave
Enjoy two years of care. Rates locked in for 2 years.

☐ **1 year** of Seasonal Care for $168 per grave

Name of Deceased **Grave ID (if known)**

_____

_____

_____

_____

_____

Billing Information

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

☐ Pay online www.riversidecemetery.org *Fast, Easy, Secure*

☐ Payment by check payable to "Riverside Cemetery"

☐ Payment by Credit Card

Account # _____ Expiration Date _____

Customer Signature _____ Date _____