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AUTHORIZATION FOR CREMATION AND DISPOSITION

THIS IS A LEGAL DOCUMENT. READ IT CAREFULLY BEFORE SIGNING. CREMATION IS IRREVERSIBLE.

I hereby request, authorize and direct Cremation Services By The Sea LLC. to arrange for _____ (“Crematory”) to cremate in accordance with and subject to Florida statutes and administrative rules the remains of _____ (“Decedent”), whose date of birth is _____. The cremation will occur within 10 days of the date of death, unless the cremation facility, having made good faith efforts in that period to obtain the following required authorizations, is unable by the end of that time to obtain: (A) medical examiner approval for the cremation; or (B) signature of a physician on the death certificate as to cause of death. If the cremation is delayed due to delay in receiving the above identified required authorizations, the cremation will occur within 48 hours after the receipt of the required authorizations pursuant to Section 497.607(1), Florida Statutes.

Place of Death _____ Date of Death _____ Sex _____ Age _____

DIRECTIVE FOR CREMATED REMAINS RELEASE

I direct that the cremated remains be disposed of as follows:

Release to : _____ Relationship: _____
 Mail, Scattering or other request: _____

Description of cremation container _____
 Description of urn _____

Section 497.607(2), Florida Statutes, provides that if, after a period of 120 days from the date of cremation the cremated remains have not been claimed, Funeral Home and Crematory may dispose of the cremated remains by scattering them at sea, placing them in a licensed cemetery scattering garden or pond, placing them in a church columbarium or otherwise as provided by administrative rule.

NON-RECOVERABLE OBJECTS AND DISCLOSURE STATEMENT

Personal items will be destroyed and are not recoverable following the cremation process. I accept responsibility for removing any personal items from the remains prior to the cremation process and hold Cremation Services By The Sea LLC., and its agents, crematory and staff harmless from such responsibility.

All Prostheses, dentures, dental fillings and bridgework will be destroyed and are not recoverable following the cremation process.

Mechanical and radioactive devices (pacemakers, etc.) create a hazardous condition when placed into the cremation chamber. Crematory will not cremate any remains which contain any type of mechanical or radioactive device. I authorize Cremation Services By The Sea LLC. to remove or to have removed from the remains any such devices prior to cremation. Unless indicated below, I certify that the remains do not contain any type of mechanical or radioactive device.

I hereby state or claim the description of mechanical or radioactive device to be removed: _____

Initial Here

LEGAL AUTHORIZATION FOR CREMATION

I hereby indemnify, release and hold harmless Cremation Services By The Sea LLC., its officers, agents, employees, representatives and associates from any and all loss, damage, liability, costs, expenses or claims resulting from this Authorization, including attorneys’ fees and costs of litigation, in connection with the cremation and disposition, and including the processing, shipping, and disposition of the cremated remains, the failure of the legally authorized person to properly identify the human remains transmitted to Cremation Services By The Sea LLC., the failure of the legally authorized person or their designee to take possession of or make proper arrangements for the final disposition of the decedent or the decedent’s cremated remains, except in acts of gross negligence on the part of Cremation Services By The Sea LLC.

I am a legally authorized person as defined by Section 497.005(39). Florida Statutes (set forth below). I authorize the cremation of the remains identified herein. I attest that I am not aware of any person in my priority class or higher who objects to this authorization. I acknowledge that no person may make a claim objecting to the cremation of the remains identified herein against Cremation Services By The Sea LLC. and crematory when Cremation Services By The Sea LLC. and crematory acts upon the authorization of the legally authorized person executing this authorization.

I hereby decline to make identification of the deceased & designate Cremation Services By The Sea LLC. or crematory to use available means to make such ID of the deceased

Comments: _____ Initial Here

Legally authorized person means, in the priority listed; (a) The decedent, when written inter vivos authorizations and directions are provided by the decedent; (b) The person designated by the decedent as authorized to direct disposition pursuant to Pub. L. No. 109-163, s. 564. as listed on the decedent’s United States Department of Defense Record of Emergency Data. DD Form 93, or its successor form, if the decedent died while serving military service as described in 10 U.S.C. s. 1481(a) (1) -(8) in any branch of the United States Armed Forces. United States Reserve Forces, or National Guard; (c) The surviving spouse, unless the spouse has been arrested for committing against the deceased an act of domestic violence as defined in s. 741.28 that resulted in or contributed to the death of the deceased; (d) A son or daughter who is 18 years of age or older, (e) A parent; (f) A brother or sister who is 18 years of age or older; (g) A grandchild who is 18 years of age or older, (h) A grandparent; or (i) Any person in the next degree of kinship. In addition, the term may include, if no family member exists or is available, the guardian of the dead person at the time of death; the personal representative of the deceased; the attorney in fact of the dead person at the time of death; the health surrogate of the dead person at the time of death; a public health officer; the medical examiner, county commission, or administrator acting under part II of chapter 406 or other public administrator, a representative of a nursing home or other health care institution in charge of final disposition; or a friend or other person not listed in this subsection who is willing to assume the responsibility as the legally authorized person. Where there is a person in any priority class listed in this subsection, the funeral establishment shall rely upon the authorization of any one legally authorized person of that class if that person represents that she or he is not aware of any objection to the cremation of the deceased’s human remains by others in the same class of the person making the representation or of any person in a higher priority class.

Signature of Legally Authorized Person _____ Date _____

Address _____

Phone Number _____ Relationship _____

Signature of Cremation Services By The Sea LLC. _____ Date _____