

# Family Funeral Home & Cremation Services



## Authorization for Cremation and Disposition at Florida/Georgia Crematory

Cremation # \_\_\_\_\_ Cremation Date \_\_\_\_\_

DECEASED NAME \_\_\_\_\_ SS# \_\_\_\_\_  
Date of Death \_\_\_\_\_ Time of Death \_\_\_\_\_ AM Sex \_\_\_\_\_  
Age \_\_\_\_\_

I hereby request and authorize, Family Funeral Home and Cremation Services. To take possession of and make arrangements for the cremation of the deceased's remains at Florida /Georgia Crematory, Havana, Florida. To induce the funeral home and crematory to cremate, process and dispose of the deceased remains, (I/we) undersigned hereby certify, warrant, represent and acknowledge (by initialing items 1-6 below) that:

- 1-  I have the full legal right and authority to authorize the cremation, processing and disposition of the deceased remains.
- 2-  I have read and understood the crematory requirements, procedures, and policies contained on the back page of this contract.
- 3-  I have NOT been denied the opportunity to personally identify the deceased remains and assume full responsibility for the identification of the deceased remains.
- 4-  I understand that if I wish to remove or retain any item from the deceased remains, I must do so directly or by authorized agent prior to the cremation process.
- 5-  I give permission for the funeral home, or its duly authorized agents to remove and dispose of any pacemaker or other type of implant mechanical or radioactive device.
- 6-  I understand that in the event the cremated remains have not been permanently picked up by me or by my designated representative within 90 days from date of cremation, the funeral home is authorized and directed to dispose of the unclaimed cremated remains in any lawful manner.

### Disclosures

Are there any special instructions? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe in detail \_\_\_\_\_

The deceased has the following implanted mechanical or radioactive devices and or prosthetic devices.  
\_\_\_\_\_

At the time of death, did he/she have a disease that was infectious, communicable or dangerous to public health?

Yes \_\_\_\_\_ No \_\_\_\_\_ if yes, please explain \_\_\_\_\_

Has the deceased ever been treated with therapeutic radio nuclides? Yes \_\_\_\_\_ No \_\_\_\_\_ if yes what was the last day of treatment administered \_\_\_\_\_

### Order for Disposition

I authorize the Crematory to cremate and process the deceased remains and return the cremated remains of the deceased to the possession and custody of the funeral home, I understand that the service and obligations of the crematory shall be fulfilled when the cremated remains of the deceased are returned to the possession and custody of the funeral home.

**Signature and Indemnity**

(If the legal next to kin is not signing below, a written statement of explanation must be completed by the person signing below)  
I declare under penalty of perjury that the foregoing information is true and correct, and that I make this statement to induce the Funeral Home / Crematory to cremate or cause to be cremated the remains of the deceased. I agree to hold harmless, indemnify and defend the Funeral Home / Crematory against any claims, liabilities, damages, cost of expenses, including attorney fees, which may result from this Authorization for Cremation and Disposition order. Also including without limitation claims that arise from or relate to shipping, identity, kinship, exposable, harmful implants, infectious disease, or other persons claiming rights to control disposition of deceased remains.

(X) \_\_\_\_\_  
Signature of person claiming legal right to control disposition

Funeral Director Signature and License Number

Print Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone \_\_\_\_\_

\_\_\_\_\_  
**Family Funeral Home and Cremation Services**  
84 Ochlocknee St.  
Crawfordville, Florida 32327  
Phone: (850)926-5919

## **Cremation Process**

**Cremation is used to prepare the deceased for memorialization. The funeral home places the human remains of the decedent in a combustible casket or other container and delivers it to the crematory. The crematory will then put the casket or container and the human remains into a cremation chamber. Incineration of the container and its contents is accomplished by substantially increasing the temperature in the cremation chamber until combustion is obtained. After approximately one and one half hours, all substances are consumed, except bone fragments (calcium compounds) and metal, as the temperature is not sufficiently high enough to consume these.**

**Due to the nature of the cremation process any personal possessions or valuable materials, such as dental gold or jewelry, that are left with the decedent and not removed from the casket or container prior to cremation will be destroyed or otherwise not be recoverable. As the casket or container will usually not be opened by the crematory, the authorized agent understands that arrangements must be made with the Funeral Home to remove any such valuables prior to the time that the decedent is transported to the crematory.**

**Following an appropriate cooling period, the cremated remains are swept or raked from the cremation chamber. The crematory makes all reasonable efforts to remove all cremated remains from the chamber, but some dust or other residue will be left behind. In addition, while every effort will be made to avoid commingling, incidental commingling of minute particles is a possibility, and the authorizing agent understands and accepts this fact.**

**When the cremated remains are removed from the cremation chamber, the skeletal remains often contain recognizable bone fragments. Unless otherwise specified, after the fragments have been separated from the other material, they will be mechanically processed (pulverized). This process of crushing or grinding may cause incidental commingling of the remains with the residue from the processing of previously cremated remains. The granulated particles of unidentifiable dimensions will be virtually unrecognizable as human remains.**

**After the cremated remains have been processed, they will be placed into a designated urn or container. The crematory will make a reasonable effort to put all of the cremated remains into the urn or container, with the exception of dust or other residue that may remain in processing equipment. The funeral home or its agent will pick up the container containing the remains and deliver it as directed by the authorizing agent.**

I/We have read and understand this disclosure concerning the cremation process.

Initials of Authorized Agents: