



A Paws in Time

Pet Cremation Services

PET CREMATION AUTHORIZATION/PET INTAKE

Name of Pet: _____ Type of Animal (*Circle one*): Dog Cat Other: _____

Age: _____ Breed: _____ Weight: _____ Sex (*Circle one*): Male Female

Date of Birth: _____ Date of Death: _____ Today's Date: _____

Owner Name/Point of Contact: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

This Authorization Form is required to be completed and signed by the Authorizing agent (I/me) prior to the final disposition of your pet. **CREMATION IS AN IRREVERSIBLE AND FINAL PROCESS.** It is important that you understand the cremation process and different options available prior to signing this. We want you to fully understand the information provided in this Authorization Form, so we will be pleased to answer any questions you may have.

CREMATION PROCESS & OPTIONS

Cremation is performed to prepare the remains of the pet for final disposition. It is carried out by placing the pet's remains into the cremation chamber where they are subjected to intense heat. Depending on the cremation option, there may or may not be commingling, or mixing, of cremated remains. Commingling can be minimized with effective portioning, but it is impossible to assert that it can be eliminated entirely. Active commingling cannot, by definition, occur with a private cremation. However, minimal incidental commingling of minute particles may occur. When the cremated remains are removed from the cremation chamber, the skeletal remains often will contain recognizable bone fragments. Once those fragments are separated from the other material, they will be mechanically processed/reduced. These granulated particles of unidentifiable dimensions will then be placed into a designated container based on the type of cremation identified below (Private, Partitioned, or Communal).

_____ **PRIVATE CREMATION** is a cremation procedure during which only one animal's body is present in the cremation chamber during the cremation process.

_____ **PARTITIONED CREMATION** is a cremation procedure during which more than one animal's body is present in the cremation chamber with dividers and the cremated remains of specific pets are to be returned. Due to a number of factors and by virtue of multiple pets being cremated within the same chamber at the same time, active commingling of cremated remains may occur but is highly unlikely as we are very careful.

_____ **COMMUNAL CREMATION** is a cremation procedure where multiple pets are cremated together without any form of separation. These commingled cremated remains are not returned to owners.

Following the cremation, cremated remains shall only be released, delivered, mailed, or disposed of by the Cemetery or Funeral Home in a dignified manner, in accordance with the law, and with expressed written consent of the Authorizing Agent. The Authorizing Agent understands that if no arrangements for the final disposition of cremated remains have been made within sixty (60) days after the cremation or if the Authorizing Agent has not taken delivery of or caused the delivery of the cremated remains, or in the event the arrangements of the final disposition have not been carried out within the sixty (60) day period because of the inaction of a party other than the Crematory, Funeral Home, or Veterinarian, then the Crematory, Funeral Home, or Veterinarian may dispose of the cremated remains in any dignified manner, including scattering.

RELEASE AND CERTIFICATION

I/We agree to release and indemnify the Veterinarian, the Funeral Home, the Crematory, their officers, directors, agents, and employees from any claim, liability, cost, or expense resulting from the reliance on or performance consistent with the directions, declarations, representations, authorizations, and agreements herein. I/We agree that the Veterinarian's, Funeral Home's, and Crematory's liability for negligent acts (of itself or its agents or employees) is limited to a refund of the cremation fees paid by me/us. I/We warrant that all representations and statements contained in this form are true and correct. I/We have read and understood all portions of this document.

This authorization for cremation and disposition was executed at Time: _____ Date: _____

Pet Owner/Family Name: _____ Signature: _____

Authorizing Agent Name: _____ Signature: _____

Disclaimer: Requests for retrieval of pet appendages, teeth, tails, paws/feet, etc. will not be honored as a part of our ongoing efforts to preserve the dignity of your pet, before, during, and after the cremation process. 14 days after receipt of remains, all left items will be disposed of without warning or contact. It is the family's responsibility to retrieve and/or request retrieval.



Vet/Clinic Name: _____

Date: _____

Vet Signature: _____

Paw Print Mold Keepsake

(1 included with every cremation)

Paw Preference: _____

Additional Paw Print Mold Keepsake: Yes No Qty: _____

Ink Prints

Ink Paw Print: Yes No

Paw Preference: _____

Ink Nose Print: Yes No

Hair/Fur Clipping

Hair/Fur Clipping: Yes No Specification: _____

Feathers *(If Applicable)*: Yes No Specification: _____

Items for Return

Are there any items you would like to have saved and returned to you after cremation? Yes No
(Blanket, Tub/Box, Collar, Toys, etc.) _____

Receptacle

Clinic Cremation Package ***(VET/CLINIC ONLY)***: Yes No

Green Velvet Bag Only (No Charge): Yes No

Standard/Online Urn: Yes No Urn Name: _____ Item #: _____

Engraving or Name Plate: _____

Custom Urn: Yes No

(Family must speak with APT staff to discuss customization process & tri-fold completion)

Merchandise

Memorial Tile/Coaster: Yes No *(Contact APT staff for details & specifications)*

Professional Pet Painting/Portrait: Yes No *(Contact APT staff for details & specifications)*