

Funeral Authority Form



DECEASED: _____

EXECUTOR/AUTHORISED PERSON'S DETAILS

TITLE: I MR MRS MISS MS DR (Please tick)

FULL NAME: _____ **DOB:** _____

RESIDENTIAL ADDRESS: _____

PHONE: _____ **EMAIL:** _____

OCCUPATION: _____ **RELATIONSHIP TO DECEASED:** _____

AUTHORITY AND PRIVACY

I hereby authorise and instruct Gillions Funeral Services to **Cremate/Bury** the deceased named above and to **Perform/Not Perform** any preparation (embalming) and presentation treatment required and to make on my behalf, all funeral arrangements. I have consulted the deceased's next of kin prior to giving this authority. I declare that I am duly authorised to give this authoirty and all information provided is true and correct.

I acknowledge and understand that you are collecting personal information about the deceased or myself for the purposes of carrying out the funeral arrangements and that Gillions Funeral Services will:

- Only share that information with relevant regulatory authorities, The Funeral Trust, and other parties who assist them to provide their services, including to recover costs.
- Use that information to provide services including the funeral of the deceased and to collect costs.
- Comply with their obligations under the Privacy Act 2020 and as set out in their privacy policy.
<https://www.gillions.co.nz/privacy-policy>

I have a right of access to that information and to request corrections.

CREMATION/BURIAL

I confirm the direction contained in the deceased's Will or the next of kin has confirmed the direction and wish of the deceased to have their body **Cremated/Buried**, and I take full responsibility for directing this course.

PERSONAL PROPERTY/ITEMS

I acknowledge that I have given clear instruction regarding any property/items left with the deceased, to Gillions Funeral Services BEFORE the cremation/interment has taken place.

ASHES

I acknowledge that any ashes that are unclaimed (in the absence of instructions to hold for a specified purpose) after a period of three years may be respectfully scattered by Gillions Funeral Services.

COSTS/FINANCIAL AGREEMENT

I authorise you to meet on my behalf all necessary costs, debts and disbursements in respect of the funeral of the deceased and to recover from me such amounts together with your account for professional services. I acknowledge that the total account for the funeral of the deceased will become due and payable three weeks from the date of the invoice and that an Account Service Fee will be added to the account and be deducted when payment is made before/on the account due date. I further acknowledge that I am liable to pay default interest at a rate not exceeding 1% per cent per month on any outstanding sum calculated on a daily basis from its due date up to and including the day of settlement. I have asserted that I am an authorised person, but in any event, I accept responsibility for ensuring payment of all funeral costs, and any legal fees and legal fees incurred by you in seeking payment of overdue accounts.

ESTIMATE

Based on your decisions to date we can give you a verbal estimate of costs being
We will provide you with a full breakdown of costs within 72 hours of meeting with us.

LIMIT ON LIABILITY

Gillions Funeral Services are relying on my authority to incur costs and make arrangements in connection with the deceased. That includes how, when and by whom the Funeral Services are to be provided.

The role of Gillions Funeral Services is to competently provide the services that have been instructed on time with reasonable care and skill. There are also laws that apply to the services they provide that will be complied with. Unless agreed in writing, they do not agree to pay for any harm that is not their direct responsibility; including (a) any claim that may reveal that another person should properly have given funeral instructions for the deceased, and (b) with respect to any property or item left with the deceased and not collected by me personally prior to the funeral. These are the extent of their obligations to myself, the deceased and anyone else.

My role is to pay all costs associated with the deceased, their funeral arrangements and the services. My role also includes dealing with any disputes within/between family and anyone else over how the deceased is to be treated, in connection with their estate, over their wishes and/or arrangements I have made for the deceased that might affect Gillions Funeral Services ability to perform or receive payment for the services arranged with me.

There may be times where things happen outside of Gillions Funeral Services or my control that may interfere with the delivery of agreed services. This may include; disputes between authorised persons, a pandemic, natural disaster, a fire is suffered, or a change in law. In this event; communication will be prompt from all parties, the first and primary concern will be the continued care of the deceased, options will be provided with associated costs, I agree that services can be stopped or delayed until issues are resolved, any costs incurred that cannot be reasonably avoided will be paid by myself.

CONFIRMATION

I confirm that I have received a copy of this Authority to Undertake Funeral Arrangements, Cremate/Bury and Financial Agreement and acknowledge the content has been explained to me.

SIGNED:

DATE:

WITNESSED BY:

OCCUPATION:

ADDRESS:

SIGNED:

DATE: