



A.R.N. FUNERAL AND CREMATION SERVICES

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- require prior to cremation:
- 1) Civil and medical authorities have issued all required permits.
 - 2) All necessary authorizations have been obtained, and no objections have been raised.
 - 3) 48 hours have transpired since the death occurred.
- **All cremations are performed individually and will only place the human remains of one individual in the cremation chamber at a time.**
 - **This form contains important information and an explanation of the cremation process. Please read it carefully and acknowledge with your initials where indicated.**

I (we), the undersigned (the "Authorizing Agent" or "AA"), hereby authorize and request ARN Cremations in accordance with and subject to its rules and regulations, and any applicable state or local laws or regulations, to cremate the human remains of _____ ("the decedent") and to arrange for the final disposition of the remains, as set forth on this form, as executed on this _____ day of _____, 20____.

X Initials of AA _____

INFORMATION: Name of deceased: _____ Date of death: _____

Age: _____ Sex: _____ Place of Death: _____

Did the decedent have any infectious disease: (circle one) Yes ☐ No ☐

If yes, please explain: _____

Mechanical, silicone implants or radioactive devices in the decedent may create a hazardous condition when placed in a cremation chamber.

The decedent's remains do not contain a pacemaker, radioactive implant, or any other device that could be explosive. I (we) also verify that the decedent was not treated with the Metastron (Strontium 89) drug, which is a new treatment for cancer patients (Metastron is still radioactive after cremation).

The remains are safe to cremate. Pacemaker: (circle one) Yes ☐ No ☐

X Initials of AA _____

ALL SUCH DEVICES MUST BE REMOVED PRIOR TO DELIVERING THE DECEDENT TO THE CREMATORY.

IDENTIFICATION: (AA TO INITIAL ONE OF THE FOLLOWING TWO):

I/We have identified the human remains that were delivered to ARN Cremations as the decedent and have authorized ARN Cremations to deliver the decedent to the Crematory premises.

X Initials of AA _____

I/We did not make any identification when requested, then we understand, I/We waive the right to make such identification and any claim as a result thereof.

X Initials of AA _____

TIME OF CREMATION: Are there any people who wish to witness the casket or container being placed in the cremation chamber? (circle one) Yes ☐ No ☐

If Yes, please provide names: _____

ARN Cremation Services are authorized to perform the cremation upon receipt of the human remains, at its discretion and according to its own time schedule, as work permits, without obtaining any further authorizations or instructions.

X Initials of AA _____

CASKETS/CONTAINERS:

ARN Cremation Services requires either a casket or cremation container for cremation. If a cremation container is provided, it must meet the following standards:

- 1) be composed of readily combustible materials suitable for cremation;
- 2) be able to be closed to provide a complete covering for the human remains;
- 3) be resistant to leakage or spillage;
- 4) be sufficient for handling with ease; and
- 5) be able to provide protection for the health and safety of Crematory personnel.

ARN Cremation Services are authorized to inspect the casket or cremation container, including opening it if necessary and in the event there is leakage or damage, ARN Cremations and its designee may contact the authorizing agent directly for instructions.

Type of Casket or Cremation Container Used

Many caskets that are comprised primarily of combustible materials also contain some exterior parts, e.g., decorative handles or rails, that are not combustible and that may cause damage to the cremation equipment. Some state environmental authorities do not allow the combustion of any plastic materials.

ARN Cremations, at its sole discretion, reserves the right to remove these materials, whether combustible or not, prior to cremation and to discard them with similar materials from other cremations and other refuse in a non-recoverable manner. No metal caskets will be cremated by ARN Cremation Services and its designee.

X Initials of AA

THE CREMATION PROCESS:

Cremation is performed to prepare the deceased for memorialization and it is carried out by placing the deceased in a casket or other container and then placing the casket or container into a cremation chamber or retort, where the remains are subjected to intense heat and flame. Through the use of a suitable fuel, incineration of the container and contents is accomplished by raising the temperature substantially (extreme temperature). After about two hours, all substances are consumed or driven off, except bone fragments (calcium compounds), residue from the container and metal (including dental gold and silver and other inorganic material) as the temperature is not sufficient to consume them.

Due to the nature of the cremation process any personal possessions or valuable material, such as dental gold or jewelry (as well as any body prostheses or dental bridgework), that are left with the decedent and not removed from the casket or container prior to cremation will be destroyed or will otherwise not be recoverable. As the casket or container will usually not be opened by The Crematory (to remove valuables, to allow for a final viewing or for any other reason unless there is leakage or damage), the Authorized Agent understands that arrangements must be made with the funeral home to remove any such possessions or valuables prior to the time that the decedent is transported to The Crematory.

Following a cooling period, the cremated remains, normally weighing several pounds, are then swept or raked from the cremation chamber. The Crematory makes a reasonable effort to remove all of the cremated remains from the cremation chamber, but total removal is not possible, as some dust and other residue from the process are always left behind. In addition, while every effort will be made to avoid commingling, inadvertent or incidental commingling of minute particles of cremated remains from the residue of previous cremations is a possibility, and the Authorized Agent understands and accepts this fact.

After the cremated remains are removed from the cremation chamber, all non-combustible materials (insofar as possible), such as bridgework, and materials from the casket or container, such as hinges, latches, nails, etc., will be separated and removed from the human bone fragments by visible or magnetic selection and will be disposed of by ARN Cremation Services with similar materials from other cremations in a non-recoverable manner, so that only human bone fragments and organic ash will remain.

When the cremated remains are removed from the cremation chamber, the skeletal remains often contain recognizable bone fragments. Unless otherwise specified, after the bone fragments have been separated from the other material, they will be mechanically processed (pulverized), which includes crushing or grinding and incidental commingling of the remains with the residue from the processing of previously cremated remains, into granulated particles of unidentifiable dimensions, virtually unrecognizable as human remains, prior to placement into the designated container.

X Initials of AA

URNS / TEMPORARY CONTAINERS:

After the cremated remains have been processed, they will be placed in the designated urn or container. ARN Cremation Services will make a reasonable effort to put all of the cremated remains in the urn or container provided, with the exception of dust or other residue that may remain on the processing equipment.

ARN Cremation Services requires that any urns provided be resistant to deterioration and breakage and that in the case of an adult the urn be a minimum size of 200 cubic inches. In the event the urn or other container selected is insufficient to accommodate all of the cremated remains, the excess will be placed in a separate receptacle. The separate receptacle will be kept with the primary receptacle and handled according to the disposition instructions on this form.

Unless a suitable urn is provided for the cremated remains, ARN Cremations will place the cremated remains in a container designed for short-term use and not recommended for any type of shipment or permanent storage.

Size and Type of Urn or Container: _____

FINAL DISPOSITION:

ARN Cremation Services strongly suggests that arrangement for final disposition of the cremated remains be made at the time the cremation arrangements are made and that this form is completed. After the cremation has taken place, the cremated remains have been placed in the designated receptacle, ARN Cremation Services will arrange for the disposition of the cremated remains as follows and the Authorizing Agent hereby authorizes ARN Cremation Services to release, deliver, or mail the cremated remains as specified.

Check one of the following:

- ☒ 1) Return to designated next of kin.
- ☒ 2) Deliver to a cemetery for inurnment and memorialization.
- ☒ 3) Deliver the cremated remains to the U.S. Postal Service for shipment by Registered, Return Receipt Mail to _____

The Authorizing Agent understands that the services of ARN Cremation Services will have been fully completed when the cremated remains are delivered to the Postal Service for mailing; that further handling and delivery are the responsibility of the Postal Service; and that ARN Cremation Services is only acting as an agent for accommodation in carrying out these instructions.

X If 3, then Initials of AA _____

- ☒ 4) Arrange for the disposition of the cremated remains at the discretion of ARN Cremation Services. The Authorized Agent understands that if this option is selected, final disposition may include the commingling of the cremated remains with other cremated remains, and that thereafter **the cremated remains of the decedent may not be recoverable.**

The Authorizing Agent understands that if no arrangement for the final disposition, release or transfer of the cremated remains are specified on this form, if ARN Cremation Services is not subsequently provided with instruction concerning the final disposition, release or transfer of the cremated remains within 10 days of the cremation, ARN Cremation Services shall be authorized to arrange for the final disposition of the cremated remains in any manner permitted by law. The Authorizing Agent understands that such final disposition may include the commingling of the cremated remains with other cremated remains, and that thereafter **the cremated remains of the decedent may not be recoverable.**

X Initials of AA _____

AUTHORITY OF AUTHORIZING AGENTS:

I hereby certify that the decedent left the following surviving heirs at law:

SPOUSE: Yes ☐ No ☐ Name _____
CHILDREN: Yes ☐ No ☐ Name _____
MOTHER/FATHER: Yes ☐ No ☐ Name _____

If all responses are no, the person(s) in the next degree of kinship is (are): _____

Explanation: _____

AUTHORIZATION:

I acknowledge that I have read and understood everything above my signature on these pages, all of which is part of this cremation authorization and identification, and hereby authorize ARN Cremation Services to perform the cremation of the decedent in accordance with this document. I/We hereby agree to indemnify, defend, and hold harmless ARN Cremation Services, its officers, agents, and employees, of and from any claim, liability, cost or claim, liability, cost or expense resulting from the ARN Cremation Services reliance on or performance consistent with the directions, declarations, representations, authorizations and agreements herein, including, but not limited to, any delay in, or damage arising from the transportation or the human remains or cremated remains of the decedent.

Signature **X** _____
Print Name _____
Relationship _____
Phone _____

Signature **X** _____
Print Name _____
Relationship _____
Phone _____

Signature **X** _____
Print Name _____
Relationship _____
Phone _____

Signature **X** _____
Print Name _____
Relationship _____
Phone _____

REPRESENTATION BY FUNERAL DIRECTOR:

By executing this authorization form as a licensed funeral director and agent for ARN Cremation Services, I warrant to the best of my knowledge the following:

- 1) That ARN Cremation Services was responsible for making arrangements with the Authorizing Agent for the cremation of the decedent and that we reviewed this authorization form with the Authorizing Agent, and that no member of our firm has any knowledge or information that would lead us to believe that any of the answers provided on this form by the Authorizing Agent are incorrect.
- 2) That the human remains delivered to designated crematory and represented as the human remains specified on this form are in fact the human remains that were identified to ARN Cremation Services as the decedent.
- 3) That our firm obtained all necessary permits and forms required by law authorizing the cremation of the decedent, and that those permits and forms are attached.
- 4) That the representation contained above concerning the decedent's cause of death and regarding any infectious or contagious disease are true.
- 5) That the representations contained above concerning a pacemaker and any other material or implant that may be potentially hazardous are true.

Licensed Funeral Director's Signature

Print Name _____