

CREMATION AUTHORIZATION FORM

The State of Ohio requires that this Authorization Form be completed and signed prior to the cremation. Please read it carefully and ask any questions you may have. Cremation is an irreversible and final process. It is important that you understand the cremation process that is described in the Addendum "A" prior to signing this authorization. We want you to fully understand the information provided so we will be pleased to answer any questions about the cremation process or the other information contained in this Form.

THIS AUTHORIZATION IS NOT A CONTRACT FOR CREMATION SERVICES. A SEPARATE CONTRACT OR CONTRACTS WILL BE REQUIRED TO PURCHASE THE SERVICE OF THE FUNERAL HOME, CREMATION SERVICE AND/OR CREMATORY.

A. INFORMATION REGARDING DECEDENT

Name of Decedent: _____ Place of Death: _____

Date of Birth: _____ Date of Death: _____ Time of Death: _____ Male Female

B. IDENTIFICATION OF THE AUTHORIZATION AGENT (PERSON AUTHORIZING CREMATION OF DECEDENT)

Name of Authorizing Agent: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

As **Authorizing Agent**, I represent that my relationship to the Decedent is as follows:

1. Initial The Person to be cremated.
2. Initial Spouse Adult Child Parent Sibling Grandparent Grandchild
3. Initial Guardian Power of Attorney Other _____
4. Initial Any person willing to assume the right of disposition including personal representative of the estate or licensed Funeral Director with custody of the body after attesting in writing and good faith that they could not locate any of the persons listed above.
5. Initial A public official or employee of the state or a political subdivision of the state that has the responsibility to carry out the disposition of the decedent's remains.

AUTHORITY OF AUTHORIZING AGENT

As Authorizing Agent, I represent that I have the right to authorize the cremation of the Decedent and I am initialing one of the following statements accordingly:

1. Initial As Authorizing Agent, I have completed Section B above. I have the paramount right to arrange the cremation of the deceased and no one has a superior or equal right.
2. Initial As Authorizing Agent, I have completed Section B above. I am aware of a living person or persons who have a **superior** Priority right to act as Authorizing Agent. I have made reasonable efforts to contact such person(s) and have been unable to do so. I have no reason to believe that the person(s) with the **superior** priority right would object to the cremation of the Decedent.
3. Initial As Authorizing Agent, I have completed Section B above. I am aware of a living person or person(s) who has an **equal** priority right to act as Authorizing Agent. Of the persons with **equal** priority rights that I was able to contact, after using reasonable efforts to do so, I certify that a majority of them agree to the cremation of the Decedent.

D. PACE-MAKERS/IMPLANTS

- Initial As Authorizing Agent, I certify that the body of the Decedent Does Does Not contain implanted or mechanical radioactive Devices (example: pacemaker/defibrillator). If they do exist, I instruct the Funeral Home /CS to remove each device and to charge for its services in making or arranging such removal.

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E. CREMATION PROCESS

Initial As Authorizing Agent, I have read and understand the description of the cremation process as outlined in Addendum "A" and authorize the cremation, processing and pulverization of the remains of the Decedent. I further authorize the Funeral Home/CS to deliver the Decedent's remains to the Crematory for the purpose of cremation and agree that the body of the decedent will be cremated in the following container: Alternative Container Cremation Casket

F. FINAL DISPOSITION/TYPE OF CONTAINER

Initial As Authorizing Agent, I certify that the cremated remains of the deceased are to be returned to the following person(s) or placed in the container(s) specified.

1. Person(s) Relationship: _____
2. Place: _____
3. Container(s): Cardboard Box Plastic Temporary Container Urn(s) Urn Vault Other _____
4. Description: _____
5. Instructions: _____

G. CERTIFICATION AND INDEMNIFICATION

The Authorizing Agent acknowledges that the Funeral Home, Cremation Service and Crematory are relying upon the representatives being made by the Authorizing Agent in this Authorization. The Authorizing Agent certifies that all the information and statements contained in the Authorization are accurate and no omissions of any material fact have been made. The Authorizing Agent agrees to indemnify and hold harmless the Funeral Home, Cremation Service, their officers, directors, employees, and agents from any claim, cause of action, cost or expense, including, but not limited to any legal fees, arising out of or resulting from the Funeral Home, Cremation Service or Crematory's reliance on or performance consistent with the directions, statements, representatives, and agreements contained in the Authorization. The Authorizing Agent may modify or revoke a properly executed Cremation Authorization Form any time prior to the Cremation.

Signature of Authorizing agent: _____ Date: _____

H. WITNESS

Signature of Witness: _____ Date: _____

Name of Witness: _____ Relationship: _____

Telephone No.: _____ E-Mail _____

TO BE COMPLETED AT TIME OF DEATH

1. IDENTIFICATION OF THE DECEDENT:

BECAUSE CREMATION IS IRREVERSIBLE, IDENTIFICATION OF THE DECEDENT IS REQUIRED BY ONE OF THE FOLLOWING METHODS:

1. Initial The Authorizing Agent or personal representative of the Authorizing Agent has viewed the remains and positively identified them as the body of the decedent.
2. Initial The Authorizing Agent or personal representative of the Authorizing Agent has authorized the Funeral Home, CS, or Crematory to photograph or create an image of the remains and, the Authorizing Agent or personal representative has positively identified the photograph or image as that of the Decedent.
3. Initial The Authorizing Agent or personal representative of the Authorizing Agent has identified the Decedent's remains by identifying on the remains or by photograph the following: Scar Tattoo Other: _____
4. Initial The Decedent's remains were identified by the Coroner.

TO BE COMPLETED BY CREMATORY STAFF

The Authorizing Agent authorizes the Funeral Home, Cremation Services and Crematory set forth below to carry out the directions and instructions of the Authorizing Agent contained in this Authorization.

Name of Funeral Home/Cremation Services: Gilberg-Hartwig Funeral Home

Address: 225 W. Monroe Street, New Bremen, Ohio 45869 419-629-2147

Name of Crematory: Regional Cremation Service Cremation Permit Obtained _____

Name of Funeral Director who will obtain Cremation/Cremation Transit Permit: _____

Addendum A

CREMATION PROCESS

The cremation processing and disposition of the remains of the Decedent shall be performed in accordance with all governing laws, and the policies, procedures and requirements of the Funeral Home, Cremation Service and designated Crematory.

CREMATION WILL ONLY TAKE PLACE AFTER ALL OF THE FOLLOWING CONDITIONS HAVE BEEN MET.

1. Decedent has been placed in an appropriate cremation container
2. Any scheduled ceremonies or viewings have been completed
3. Civil authorities have issued all required permits and more than 24 hours have elapsed since the deceased passed away
4. All necessary authorizations have been obtained in compliance with the policies set forth and no objections to the cremation have been raised by any party to the Funeral Home, Cremation Service or Crematory.
5. Death certificate has been signed by a physician or medical examiner

The cremation of the Decedent's remains may take place before or after ceremonies to memorialize the Decedent. Cremation is performed to prepare the remains for final disposition. It will be carried out by placing the remains in the casket or alternative container which is then placed into a cremation chamber or retort where they are subjected to intense heat and flame. During the cremation process, it may be necessary to open the cremation chamber and reposition the remains of the Decedent in order to facilitate a complete and thorough cremation. Through the use of suitable fuel, the incineration of the container and its contents is accomplished, and all substances are consumed or driven off, except bone fragments (calcium compounds) and metal (including dental gold and silver and other non-human materials) as the temperature is not sufficient to consume them. Due to the nature of the cremation process, any personal possessions or valuable materials such as dental gold or jewelry (as well any body prosthesis or dental bridgework) that are left with the remains and not removed from the casket or container prior to cremation may be destroyed or if not destroyed, will be disposed of by the Crematory. The Authorizing Agent understands that arrangements must be made with the Funeral Home, Cremation Service or Crematory to remove any such possessions or valuables prior to the time that the remains of the Decedent are transported to the Crematory. Following a cooling period, the cremated remains, which normally weigh several pounds in the case of an average-size adult, are then swept or raked from the cremation chamber. Although the Crematory will take reasonable efforts to remove all cremated remains from the cremation chamber, it is impossible to remove all of them, as some dust and other residue from the process will be left behind. In addition, while every effort will be made to avoid commingling, inadvertent and incidental commingling of minute particles of cremated remains from the residues of previous cremations is a possibility and the Authorizing Agent understands and accepts this fact. After the cremated remains are removed from the cremation chamber, all non-combustible material (insofar as possible) such as dental bridgework and hinges, latches and nails from the container will be separated and removed from the human bone fragments by visible or magnetic selection. The Crematory is authorized to dispose of these materials with similar materials from other cremations in a non-recoverable manner, so that only human bone fragments will remain. When the cremated remains are removed from the cremation chamber, the skeletal remains will often contain recognizable bone fragments. Unless otherwise specified, after the bone fragments have been separated from the other material, they will be mechanically pulverized. The process of crushing or grinding may cause incidental commingling of the remains with the residue from the processing of previously cremated remains. These granulated particles of unidentifiable dimensions, which are virtually unrecognizable as human remains, will then be placed in a designated container.

After the cremated remains have been processed they will be placed in the urn selected by the Authorizing Agent, or if an urn is not provided to the Crematory, in a temporary container provided by the Crematory. The Authorizing Agent acknowledges that it is impossible to recover all of the dust and residue from the cremation and processing. In the case of an adult, it is recommended that the urn or temporary container be a minimum size of 200 cubic inches. In the event the urn or temporary container is insufficient to accommodate all of the cremated remains, the excess will be placed by the Crematory in a secondary container. This secondary container will be kept with the urn or the temporary container and handled per the direction of the Authorizing Agent; provided, however, that the secondary container may not be designed for shipping. All urns or containers provided to the Funeral Home, Cremation Service or Crematory must be appropriate for shipping.

Following the cremation, the Authorizing Agent directs the Funeral Home, Cremation Service or Crematory to undertake actions set forth to arrange the final disposition of the cremated remains of the Decedent. If the cremated remains are shipped at any time, the Authorizing Agent directs that the Funeral Home, Cremation Service or Crematory utilize registered U.S. mail with a return receipt or a shipping service that uses an internal system for tracing the location of the cremated remains during shipment and requires a signed receipt of the person taking delivery of the cremated remains. The Funeral Home, Cremation Service or Crematory will not be held responsible for any loss or damage of the cremated remains shipped via Registered Mail with the United States Postal Service or any other carrier. The Authorizing Agent understands that in the event the arrangements for the final disposition have not been carried out within the sixty (60) day period following the cremation because of the inaction of a party other than the Funeral Home, Cremation Service or Crematory, then the Funeral Home, Cremation Service or Crematory may dispose of the cremated remains in a grave, crypt or niche. The estate of the Decedent shall be liable for the cost of such final disposition in a grave, crypt or niche and shall reimburse the Funeral Home, Cremation Service, or Crematory immediately upon receipt of an invoice.

WITNESSES

The Funeral Home, Cremation Service, or Crematory will not allow anyone to be present prior to the cremation, during the cremation, or during the removal of the cremated remains from the crematory unit.

CASKET OR ALTERNATIVE CONTAINER

The remains are to be cremated in a combustible casket or alternative container that is capable of being completely closed, is resistant to leakage or spillage, is sufficiently rigid to be handled easily, and provides protection for the health and safety of the Funeral Home, Cremation Service and Crematory personnel. The Crematory is authorized to inspect the casket or alternative container, including opening it if necessary. In the event that the casket or container does not meet the above requirements, the Crematory will notify the Authorizing Agent. Many caskets that are comprised primarily of combustible material also contain some exterior parts (decorative handles or rails) that are not combustible and may cause damage to the cremation equipment. As Authorizing Agent, I authorize the Crematory, in its discretion, to remove and discard the non-combustible materials. I understand that some crematories will not accept metal or fiberglass caskets. I further understand that the casket or alternative container will be consumed as part of the cremation process.

MULTIPLE CREMATIONS

Under Ohio law, the remains of more than one decedent may not be simultaneously cremated in the same cremation chamber unless the decedents were related or were, anytime during the one-year period preceding their deaths, living in a common-law marital relationship or cohabiting. Unless authorized in writing per Ohio Code, the Decedent's remains shall be individually cremated.

PERSONAL PROPERTY

All personal property and effects delivered with the remains of the Decedent to the Crematory, including jewelry, clothes, hair pieces, hearing aids, dental bridgework, eyeglasses, and shoes will be destroyed in the cremation process or otherwise discarded by the Crematory, in its sole discretion, unless specific written instructions for delivery to the Authorizing Agent are provided to the Crematory.

TIME OF CREMATION

As indicated in the Non-provisional Death Certificate, the cremation of the Decedent's remains cannot take place until 24 hours have elapsed from the time of death. If the remains are not embalmed and if the cremation is not to occur within eight hours of the delivery of the remains to the Crematory, the Crematory will place the remains in a refrigerated facility for which there will be a daily charge.