



## PET CREMATION AUTHORIZATION

(For Contracted Services)

Name of Pet: \_\_\_\_\_ ("Pet") Date: \_\_\_\_\_

Type of Pet: \_\_\_\_\_ Gender: \_\_\_\_\_ Weight: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ ("Owner") Phone: \_\_\_\_\_

Owner's Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Owner's Email Address: \_\_\_\_\_

**1. Cremation Authorization:** The Owner or Legal Representative hereby authorizes the Crematory to arrange the cremation of the remains of the Pet at their facility. In providing this authorization, the undersigned represents that he or she is the Owner or the Legal Representative of the Owner and has the full right and authority to arrange the cremation and disposition of the cremated remains.

**2. Cremation Process:** The undersigned acknowledges that due to the nature of the cremation process, any material on the remains of the Pet, such as collars, tags, etc, will be destroyed if not removed. Accordingly, the undersigned understands it will either be destroyed or removed and disposed of by the Crematory.

**3. Type of Cremation:**          Private Cremation                  Communal Cremation (ashes not returned)

**4.** Deliver the cremated remains to: \_\_\_\_\_

Release the cremated remains to: \_\_\_\_\_ Phone: \_\_\_\_\_

If not picked up within thirty (30) days of the date of cremation, the Crematory may dispose of the cremated remains in any lawful manner.

Scatter the cremated remains in any lawful manner.

Other: \_\_\_\_\_

**Certification:** The undersigned certifies the accuracy of all information on this Authorization and will indemnify and hold harmless the Crematory, their owners, employer and agents, from any liability, cost, expenses or claims resulting from this Authorization and release thereon. Signature of Owner or Legal

Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt of Cremated Remains: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_