

AUTHORIZATION FOR CREMATION AND DISPOSITION

The undersigned has (have) contracted with **ACCORD Cremation & Burial Services** for disposition of the remains of _____ ("Decedent"). The undersigned desire(s) to have the remains of the decedent cremated.
(Decedent's Address) _____

THEREFORE, the undersigned, hereby request and authorize Gateway Crematory, or their duly authorized agent ('crematory'), in accordance with and subject to their rules and regulations as well as those of the State of California, to cremate or cause to be cremated the remains of the decedent.

I (WE) certify that the decedent did not give directions that His/Her remains not to be cremated, and that **(Check and initial Applicable box.)**

- _____ I am making this authorization for myself.
- _____ I am the surviving spouse of the decedent.
- _____ I am (We are) the surviving child (children - all or majority)
_____ Number of children. There being no surviving spouse.
- _____ I am (We are) the surviving parents (Parents)
_____ Number of parents. There being no surviving spouse or children.
- _____ I am (We are) all or majority of the surviving sister(s) and brother(s)
_____ Number of sisters and Brothers. There being no surviving spouse, children, or parents.
- _____ I am (We are) all or a majority of the surviving niece(s) or nephew(s)
_____ Number of nieces or nephews. There being no surviving spouse, children, parents, sisters, and brothers.
- _____ I am (we are) all or a majority of the surviving next of kin of closest degree of descent as defined in California Probate Code 6400 et seq. and California Health and Safety Code 7100.
- _____ I am the Executor of the Estate. (Attach a copy of the Will of court appointment.)
- _____ I have a durable Power of Attorney authorizing me to act on the decedent's behalf. (Attach a copy of the durable Power of Attorney.)
- _____

I (We) certify and represent that I (We) have the right to authorize the cremation, processing, and disposition of the deceased, and agree to hold ACCORD CREMATION AND BURIAL SERVICES and the crematory harmless from liability on account of said authorization.

I (We) acknowledge that we have been informed that the cremation process is performed by placing the casket or other container with the deceased in it in a cremation chamber where the temperature is raised to about 1100 Degrees Celsius (2012 Degrees Fahrenheit) which is about the temperature used in firing china or bricks. After about one and one half hour all substances are burned or driven off except bone fragments since the temperature is not sufficient to consume all of the bone structure which is composed largely of metal calcium. Upon completion, the remains are scraped out of the chamber. The crematory makes a reasonable effort to remove all of the remains from the chamber, but it is impossible to remove all, some dust and other residue from the process are always left behind. The remains removed consist of bone fragments of varying sizes. To allow these fragments to fit into containers, they are crushed to a uniform size. After this the crematory makes reasonable effort to put all remains in the container with the exception of dust and other residue which may remain on the equipment.

The human body burns with casket, container, or other material in the cremation chamber. Some bone fragments are not combustible at the incineration temperature and, as a result, remain in the cremation chamber. During the cremation, the contents of the chamber may be moved to facilitate incineration. The chamber is composed of ceramic and other material which disintegrates slightly during each cremation, and the product of that disintegration is commingled with the cremated remains. Nearly all contents of the cremation chamber, consisting of the cremated remains, disintegrated chamber material and small amounts of residue from previous cremations are removed together and crushed, pulverized or ground to facilitate inurnment or scattering. Some residue remains in the cracks and uneven places of the chamber. Periodically, the accumulation of this residue is removed and interred in a dedicated cemetery property or scattered at sea.

Due to the nature of the cremation process, any personal possessions or valuable materials, 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 the cremation will be destroyed or will otherwise not be recoverable. As the casket or container will usually not be opened by the crematory, any such possessions or valuables must be removed prior to the time the decedent is transported to the crematory.

Urn or Container Description: (Initial One)

- _____ Cardboard (For Scattering Only)
- _____ Plastic
- _____ Copper Box
- _____ Urn Describe: _____

Cremation Container/Casket Description:

- _____ Cardboard (Alternative Container)
- _____ Flat Top Casket
- _____ Raised Flat Top Casket
- _____ Casket Describe: _____

I authorize the crematory to release the cremains to ACCORD CREMATION AND BURIAL SERVICES for disposition: (Check and Initial One)

- _____ Release to _____ Phone Number _____
- _____ Scatter at Sea by ACCORD Services or its agents. **(Cremains are Non-Recoverable)**
- _____ Deliver by Registered Return Receipt Mail To: _____

I/We release Accord Cremation and Burial Services from all responsibility upon delivery to the Post Office.

When cremating, the crematory will exercise reasonable efforts in keeping cremated remains separate. However, because it is impossible to guarantee or warrant that some bone particles or the residue of one cremation could not possibly be mixed with those of another. I (We) specifically give express permission for: **(Initial each space)**

1. _____ The Cremation to take place including incidental or inadvertent commingling of the remains with residue to prior cremations (Section 7054.7 (a) (1) California Health and Safety Code). The processing of the remains including crushing or grinding of incidental commingling of the remains with residue from processing other remains (Section 7054.1 California Health and Safety Code).
2. _____ In the event the cremated remains do not fit in the urn/container chosen, I (We) direct the crematory to return the balance of the remains to me in a second container (Plastic Urn).
3. _____ I (We) authorize the crematory to make reasonable effort to recover all cremated remains from the furnace; to discard metal used in the construction of the casket, prostheses, and other metal; and to place in the cremation container/urn only cremated remains belonging to the deceased. I (We) do not hold the crematory responsible beyond reasonable effort. I (We) understand that if it is my intention to save any items, it is my responsibility to remove them before cremation. No remains will be accepted for cremation with any type of jewelry.
4. _____ Mechanical devices, implants, and certain nuclear medicine residues in the decedent may create a hazardous condition when placed in the cremation chamber and subjected to heat. The crematory may not cremate any human remains which contain any mechanical devices, implants, or if deceased was previously treated with Strontium_89. The following list describes all devices (including mechanical, prosthetic or radioactive implants or materials) which may be implanted in or attached to the decedent: (Use line below)

5. _____ I (We) authorize **Accord Cremation and Burial Services** to remove and dispose of a pacemaker if listed on the line above. I (We) agree to indemnify **Accord Cremation and Burial Services**, its agents and employees, against any loss from any claims demands or damages which may be or declared against it or them by reason of our failure to timely disclose the existence of mechanical devices and implants.
6. _____ I (We) agree to indemnify, release and hold the crematory, its employees, agents, and its assigns, harmless from any loss damages, liability or cause of action (Including attorneys' fees and expenses of litigation) in connection with the cremation and disposition of the cremated remains of the deceased, as authorized herein, or my failure to correctly identify the remains of the deceased, disclosed the presence of any implanted mechanical or radioactive devices, or take possession of, or make permanent arrangements for the disposition of such remains.
7. _____ In the event the cremated remains are not picked up within **20 days** of cremation, upon written notice. **Accord cremation and Burial Services** is authorized to dispose of the cremated remains in any manner it may deem suitable, at any time thereafter.
8. _____ Due to limitations on the cremation chamber, the crematory cannot cremate anyone in excess of 250 pounds. I (We) verify that the deceased was not in excess of 250 pounds. In the event the deceased is in excess of 250 pounds another crematory will be used and additional charges will apply.

I (We) are aware of no objections to this cremation by the spouse, any child, parent or sibling of the decedent, or of provisions of any contract instruction made by the decedent.

I (We) have either identified or waived my (our) rights of identification as noted above of the human remains that were delivered to **Accord Cremation and Burial Services** as the decedent and I (We) have authorized **Accord Cremation and Burial Services** to deliver the decedent to the crematory.

I (We) hereby agree to indemnify and hold harmless **Accord Cremation and Burial Services**, the crematory, their officers, directors, agents, and employees from any claims, liability, cost or expense resulting from **Accord Cremation and Burial Service's** and the Crematory's reliance on or performance consistent with the directions, declarations, representations, authorizations and agreements herein, including but not limited to, and delay in, or damage arising from the transportation of the human remains or cremated remains of the decedent.

By execution of this form below, and initials of appropriate spaces above, the undersigned(s) warrant(s) that all representations and statement contained in this form are true and correct. That these statements are being relied on by **Accord Cremation and Burial Services** and the Crematory and that the undersigned(s) has (have) read and understood the provisions of the document.

_____ Signature	_____ Address	_____ Phone Number	_____ Relationship
_____ Signature	_____ Address	_____ Phone Number	_____ Relationship
_____ Signature	_____ Address	_____ Phone Number	_____ Relationship
_____ Signature	_____ Address	_____ Phone Number	_____ Relationship

This agreement may be executed in any number of counterparts, each of which so executed shall be deemed to be original, and such counterparts shall together constitute but one and the same Agreement. Each party may execute a facsimile counterpart signature page to be followed by an original counterpart. Each such facsimile counterpart signature page shall constitute a valid and binding obligation of the party signing such facsimile counterpart.

WITNESS: IF THIS DOCUMENT IS NOT SIGNED BEFORE STAFF MEMBER OF ACCORD CREMATION AND BURIAL SERVICES, PLEASE ATTACH A PHOTOCOPY OF PHOTO IDENTIFICATION FOR EACH PERSON SIGNING, OR IF NO PHOTO IDENTIFICATION, THEN ALL SIGNATURES NEED NOTARIZATION.

Accord Cremation and Burial Services Representative

Date

FOR INFORMATION REGARDING CEMETERY AND CREMATION MATTERS, CONTACT:
DEPARTMENT OF CONSUMER AFFAIRS/CEMETERY AND FUNERAL BUREAU
1625 N MARKET BLVD. STE. S-208, SACRAMENTO, CA 95834 PHONE: (916) 574-7870