

Stork Family Mortuary
1895 Wadsworth Blvd. Lakewood, CO. 80214
(303) 237-5350 Fax (303) 234-1859
Storkfamilymortuary@gmail.com

Urn Selected: _____

CREMATION AUTHORIZATION

Remove any article from the body: _____ Initial _____
Decedent: _____ Sex: _____ Marital status: _____
Date of Birth: _____ Place of Birth: _____
Date of Death: _____ Place of Death: _____

INSTRUCTIONS FOR CREMAINS: _____

I (We), the undersigned, hereby request and the authority is hereby granted to the Mortuary and to the Crematory for the cremation of the above named deceased person. I understand that this cremation will be performed in accordance with and subject to the rules and regulations that govern cremation of deceased persons in the State of Colorado.

The undersigned does hereby certify and represent that they have the legal authority to make such authorization for this crematory and hereby agree to relieve the Mortuary and the Crematory from any and all liabilities whatsoever on account of the performance of said service. It is understood that the cremated remains may consist of small bone pieces and ash. The Mortuary and the Crematory assume no additional responsibility for the cremated remains after the delivery of said cremains to any next of kin or agent thereof.

PACEMAKER: Should there be a pacemaker implanted in the decedent, authority is hereby given for removal and disposal of the heart pacemaker. Yes _____ No _____

SHIPMENT: If disposition of the cremated remains involves shipment, the undersigned authorizes the Crematory to make this shipment by way of the United States Postal System and hereby agrees to assume all liability for the safe arrival of said shipment and to indemnify and hold harmless the Mortuary and Crematory for any claims whatsoever related to such shipment.

DISPOSITION OF CREMATED REMAINS: The Cremated remains not claimed may be disposed of in a suitable manner as law provides after a period of one hundred and twenty (120) days. However, a certified notice to the last known address of the Authorized Representative must be made at least thirty (30) days prior to the date of final disposition. If the arrangements for their final disposition are not made within the specified time, the Management shall be in no way liable for the loss or destruction of said remains. The person authorizing the cremation, or the heirs at law, either jointly or severally, shall be held liable for rental space occupied by the remains pending the time prior to the final disposition of the cremated remains.

| | | |
|----|-----------------------------|--------------|
| 1. | _____ | _____ |
| | Signature | Relationship |
| | _____ | _____ |
| | Print Name | Address |
| 2. | _____ | _____ |
| | Other Authorizing Signature | Relationship |
| | _____ | _____ |
| | Print Name | Address |

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