



2024 Marietta Ave  
Lancaster, PA 17603  
Douglas E. Redinger Supv.  
(717) CREMATE or (717) 273-6283

## CREMATION AND DISPOSITION AUTHORIZATION

This Authorization Form must be completed and signed prior to the cremation. Please read it carefully and ask us 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 this Authorization Form prior to signing it. We want you to fully understand the information provided in this Authorization Form, so we will be pleased to answer any questions about the cremation process or the other information in this Form.

**THE AUTHORIZATION IS NOT A CONTRACT FOR CREMATION SERVICES. A SEPARATE CONTRACT OR CONTRACTS WILL BE REQUIRED TO PURCHASE THE SERVICES OF CREMATION SERVICES OF LANCASTER, INC.**

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

### NAME OF FUNERAL HOME PERFORMING CREMATION

Name of Funeral Home & Crematory: Cremation Services of Lancaster, Inc.

Address: 2024 Marietta Avenue, Lancaster, PA 17603

### PACEMAKERS, IMPLANTS, AND PROSTHESES

Pacemakers, radioactive, silicon or other implants, mechanical devices or prostheses may create a hazardous condition when placed in the cremation chamber and subjected to heat and must be removed prior to introducing the body into the cremation chamber. As Authorizing Agent, I hereby authorize Cremation Services of Lancaster, Inc. to surgically remove these items, before introducing the deceased into the cremation chamber. In addition, as Authorizing Agent, I grant Cremation Services of Lancaster, Inc. to submit prosthetics or any recyclable materials to be recycled in accordance with state and federal laws.

### WEIGHT RESTRICTIONS

If the deceased weighs in excess of 400 pounds, an additional crematory fee will be assessed based on the weight of the deceased. These fees are listed on our General Price List.

### 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 Cremation Services of Lancaster, Inc. 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 that 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. As Authorizing Agent, I understand that Cremation Services of Lancaster, Inc. will use the basic cardboard container when performing the cremation unless an upgraded container is selected which will be indicated on the Statement of Goods and Services Contract.

### WITNESSES

Witnessing a cremation can be an emotional experience. Witnesses are assuming the risks involved and fully release Cremation Services of Lancaster, Inc. from any liability. Witnesses approved by the Authorizing Agent may be present at the cremation room during the cremation of the Decedent's remains. If you desire witnesses, the Authorizing Agent must sign the necessary authorizations/releases forms and indicate the names and relationship of any and all witnesses on a separate agreement which will be provided.

### THE CREMATION PROCESS

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 of the Decedent for final disposition. It is carried out by placing the Decedent's 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. All cremations are performed individually. 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 as any body prostheses 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 Cremation Services of Lancaster, Inc. 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 will 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 of the 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 often will 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 into a designated container.

**PERSONAL PROPERTY**

All personal property and effects delivered with the remains of the Decedent to the Crematory, including jewelry, clothes, hair pieces, dental bridgework, eyeglasses, and shoes, will be destroyed in the cremation process or otherwise discarded by the Crematory, in its sole discretion.

**URN OR TEMPORARY CONTAINER**

After the cremated remains have been processed, they will be placed in the urn selected or if an urn is not selected, a temporary plastic container will be used. 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 according to the final disposition instruction set forth below; provided, however, that the secondary container may not be designed for shipping. All urns or containers provided to Cremation Services of Lancaster, Inc. must be appropriate for shipping. The Authorizing Agent directs the Crematory to use the specified urn or container listed on the Statement of Good and Services.

**FINAL DISPOSITION**

Following the cremation, the Authorizing Agent directs Cremation Services of Lancaster, Inc. to release the Cremated Remains to the Authorizing Agent or others indicated below (those authorized to obtain cremated remains). If the Authorizing Agent chooses to have the cremated remains shipped at any time, the Authorizing Agent directs that Cremation Services of Lancaster, Inc. 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 authorizing Agent assumes all liability for any damage that may arise from such mail shipment and agrees to indemnify and hold Cremation Services of Lancaster, Inc. harmless from all claims and liability that may arise from such shipment.

Cremation Services of Lancaster, Inc. does NOT accept responsibility for the cremated body after delivery to any agent, person or postal facility.

The Authorizing Agent understands that if no arrangements for the final disposition, release or shipment of the cremated remains are made in this Authorization, Cremation Services of Lancaster, Inc. shall hold the cremated remains for thirty (30) days after cremation. If during that thirty (30) day period the cremated remains are not retrieved by the person designated above to receive them or by the Authorizing Agent, or if arrangements for their final disposition are not made, then Cremation Services of Lancaster, Inc. return the cremated remains to the Authorizing Agent at the address listed in Section #3. In the alternative, if no arrangements for the final disposition of the cremated remains have been made within thirty (30) days after the cremation and if the Authorizing Agent has not taken delivery of or caused the delivery of the cremated remains, or in the event the arrangements of the final disposition have not been carried out within the thirty (30) day period because of the inaction of a party other than Cremation Services of Lancaster, Inc., then Cremation Services of Lancaster, Inc. may charge a fee for sheltering of the remains and the Authorizing Agent shall be liable for the cost.

**THIS IS A LEGAL DOCUMENT. IT CONTAINS IMPORTANT PROVISIONS CONCERNING CREMATION. CREMATION IS IRREVERSIBLE AND FINAL. READ THIS DOCUMENT CAREFULLY BEFORE SIGNING.**

By executing this document, the undersigned warrant that all representations and statements contained on this form are true and correct and that these statements were made freely and voluntarily to induce Cremation Services of Lancaster to cremate the human remains of the decedent and that the undersigned have read and understand the provisions contained in this form.

**(Print all information except signatures.)**

**1. IDENTIFICATION OF THE DECEDENT**

Name of Decedent: \_\_\_\_\_ Date of Death: \_\_\_\_\_ Time of Death: \_\_\_\_\_

Place of Death: \_\_\_\_\_ Sex: M  F  Age: \_\_\_\_\_ DOB: \_\_\_\_\_ S.S.: \_\_\_\_\_

**3. IDENTIFICATION OF AUTHORIZING AGENT**

Name of Authorizing Agent: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Relationship to Decedent: \_\_\_\_\_

**4. AUTHORITY OF AUTHORIZING AGENT**

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

\_\_\_\_\_  
(Initials) I certify that I do not have actual knowledge of any living person who has a superior right to act as the Authorizing Agent.

**OR**

\_\_\_\_\_  
(Initials) There is another living person(s) listed below who has a superior or equal right to act as Authorizing Agent. That person(s) has provided me written permission to serve as Authorizing Agent.

**OR**

\_\_\_\_\_  
(Initials) There is another living person(s) listed below who has a superior or equal right to act as Authorizing Agent. I have made all reasonable efforts to contact such person(s), but have been unable to do so. I have no reason to believe that such person(s) would object to the cremation of the Decedent's remains.

Name(s) of Other Persons: \_\_\_\_\_

**FINAL DISPOSITION**

Cremation Services of Lancaster shall release, deliver, or ship the cremated remains of the Decedent to the authorized representative or destination listed below

Deliver to \_\_\_\_\_ cemetery with which arrangements have already been made.

Ship to: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

Release to:  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Other (s) authorized to receive Cremated Remains (proper I.D. is required upon pick up)  
Names and Relationship:

**CERTIFICATION AND INDEMNIFICATION**

The Authorizing Agent acknowledges that Cremation Services of Lancaster, Inc. are relying upon the representations being made by the Authorizing Agent in this authorization. The Authorizing Agent certifies that all of 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 Cremation Services of Lancaster, Inc., their officers, directors, employees and agents from any and all claims, demands, actions, causes of action or suits of any kind or nature whatsoever, including, but not limited to, any legal fees arising out of or resulting from Cremation Services of Lancaster, Inc. reliance on or performance consistent with the directions, statements, representatives and agreements contained in the Authorization.

Executed at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_,

Signature of Authorizing Agent: \_\_\_\_\_