



**ETERNAL CREMATION SERVICES, LLC**  
 464 A Patricia Ave Dunedin, FL 34698  
 Phone: 727 804-1702 Fax: 727 266-4014  
**AUTHORIZATION FOR CREMATION AND DISPOSITION**

I/We, the undersigned, certify and represent that I/we have full legal right and authority, and know of no living person who has a superior priority right under state law, to authorize the cremation, processing and disposition of the remains of

\_\_\_\_\_ (“the deceased”). Date of Death \_\_\_\_\_, Time \_\_\_\_\_

(The undersigned further represents that he or she is not aware of any objection to the cremation of the deceased’s human remains by others in the same class as the undersigned or of any person in a higher priority class. I/We hereby request and authorize Eternal Cremation Services, LLC (hereinafter referred to as the “Cremation Service”) to take possession of and make arrangement for the cremation of the remains of the deceased at the selected crematory (“The Crematory”). We authorize the crematory to release the remains of the Deceased to the possession and custody of the Cremation Service. I/We understand that the services and obligations of the Crematory shall be fulfilled when the cremated remains of the deceased are returned to the possession and custody of the Cremation Service. I/We hereby authorize the Cremation Service to arrange for the disposition of the deceased as follows:

**The cremation will be completed within 3 days following all required approvals, pursuant to F.S. 497.607(1).**

Description of container(s) to hold ashes: \_\_\_\_\_

- Release to Family/Representative: \_\_\_\_\_
- Ship via U.S.P.S. Registered Mail\* TO: \_\_\_\_\_

\*Cremation Service and Crematory are not responsible for any loss or damage of cremated remains shipped via United States Postal Service Registered Mail.

**VERIFICATION OF IDENTIFICATION**

Describe Methods Used to Confirm Identification (e.g., photographs, scars, tattoos): \_\_\_\_\_

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

The undersigned, having declined to make identification through actual viewing of the remains of the above named deceased, hereby authorizes the Crematory and Cremation Service to perform identification verification through the means listed above and agrees to indemnify and hold harmless the Crematory and Cremation Service its officers, directors, affiliates, and agents harmless from any and all claims, liabilities, damages, losses, suits or causes of action (including attorney’s fees and expenses of litigation) brought by any person, firm or corporation or the personal representative thereof, relating to or arising out of such failure to identify.

The cremation processing and disposition of the remains of the Deceased authorized herein shall be performed in accordance with all the governing laws, the rules, regulations and policies of the Crematory and Cremation Service and the following terms and conditions:

1. The remains of the deceased will not be accepted for cremation unless received by the Crematory in a combustible, leak resistant, rigid cremation container. The Crematory is authorized to remove and dispose of handles, ornaments and any other non-combustible container in any lawful manner it deems appropriate.
2. Mechanical or radioactive devices implanted in the remains of the Deceased (such as pacemakers, etc.) may create a hazard when placed in the cremation chamber. The crematory will not cremate any human remains which contain any type of implanted mechanical or radioactive devices. In the event the remains of the Deceased contain such a device I/We hereby authorize the Cremation Service, its agents and employees, to arrange for such mechanical devices to be removed from the remains of the Deceased prior to the cremation, and dispose of them at its discretion. I/We certify that the remains of the deceased (BOX) DO (BOX) DO NOT contain any type of implanted mechanical or radioactive device. Listed below are all the implanted mechanical and radioactive devices which the Cremation Service is authorized to have removed from the remains of the Deceased prior to cremation and dispose of as indicated:

\*Device \_\_\_\_\_ Disposition \_\_\_\_\_

*\*If no instruction for disposition is given for items the Cremation Service will use its own discretion for disposition*