

Cremation Society of Central California
3037 Tulare Street, Fresno, CA 93721
(559) 237-3579
FD 1374

AUTHORIZATION FOR DISPOSITION WITH OR WITHOUT EMBALMING

To: CREMATION SOCIETY OF CENTRAL CALIFORNIA License # FD 1374

RE: _____ (Decedent) I, _____

Do Do Not (check one) request embalming, which I understand is the addition to, or the replacement of, body fluids by chemical preservations or the application of chemical preservations for the temporary preservation of the body. I understand that embalming is not required by law.

I understand that for storage or embalming purposes the decedent may be transported to the following licensed funeral establishment: _____ then returned for funeral services. I understand I may be charged an additional fee for transport.

The undersigned hereby represents that he/she has legal right to control disposition of the remains of the decedent.

Executed this _____ day of _____, year of _____ at _____, California

Signature Relationship to Deceased

Below this line is to be completed by the funeral establishment if Authorization to Embalm and Notification to Transport is obtained orally (By Telephone)

The above statement of authorization and notification was read to: _____

Relationship _____ who Did Did Not (check one) authorize embalming at the above funeral establishment.

Phone _____ Date and time authorization granted _____

Signature of funeral establishment representative accepting authorization.

I declare under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, year of _____ at _____, California

(s) _____