

Marlatt Funeral Home & Crematory

www.marlattfuneralhome.com

713 Central Ave. N., Kent, WA 98032 ~ 253.852.2620, fax 253.859.9151

AUTHORIZATION FOR CREMATION & DISPOSITION

The undersigned hereby requests and authorizes Marlatt Funeral Home to cremate the remains of:

Name _____ **File#** _____ **Tag#** _____

Date of Death _____ **Place of Death** _____ **age** _____ **sex** _____

AND certifies and represents that he/she has the legal right to make such authorization AND FURTHER, agrees to hold the crematory and Marlatt Funeral Home harmless from any liability on account of said authorization and cremation

initial


 [] **ADDITIONAL CHARGES MAY APPLY FOR INDIVIDUALS OVER THE WEIGHT OF 300 POUNDS.**
THESE CREMATIONS MAY BE DONE AT AN ASSOCIATE CREMATORY, FIRST CREMATION SERVICE OF KENT.

MERCHANDISE:

initial

 [] Type of casket or container selected: _____

 [] Type urn selected: _____


 [] 2nd container/remembrance urn: _____

Marlatt Funeral Home is further authorized to:

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 [] Release cremated remains to _____


Phone # _____

 [] I agree to pick up, or arrange for other method of disposition, of cremated remains within 30 days following completion of cremation process.


 [] Deliver to _____ Cemetery


STATE LAW PERTAINING TO CREMATION:

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 [] JWAC 308 47 050 The cremated remains will be processed by pulverization and reduced to unidentifiable dimensions.


 [] JWAC 308 47 050 Prosthesis, bridgework or similar items, if recoverable, shall be discarded.


 [] JWAC 308 47 060 It is possible that the entire volume of processed cremated remains may not fit within the dimensions of the designated container. The crematory/funeral home will return or deliver the excess in a separate container.

 [] JWAC 308 47 070 When cremated remains have been in the custody of the crematory or funeral home for a period of 90 days or more, and when an attempt to contact the authorizing agent by registered mail for disposition instructions is unsuccessful, the crematory or funeral home may dispose of the cremated remains in any LEGAL MANNER and SHALL NOT BE LIABLE for the non-recoverability of the remains.

CREMATION PROCESS

initial

 [] Cremation is the process whereby human remains are reduced as a result of being subjected to intense heat and flame in a cremation chamber. The human remains of the decedent are placed in a combustible casket or container, and placed into the cremation chamber. After approximately one and one half hours all substances are consumed, except some bone fragments and metal. Following a cooling period the cremated remains are swept from the chamber. Any remaining metal is separated from the remains and discarded or recycled. The remains are then mechanically pulverized to permit their placement in an urn or other suitable container. It is possible that co-mingling of the remains with minute amounts of previously cremated remains will occur during the sweeping of the chamber or the mechanical pulverization.

 [] Note: **Heart pacemakers**, implanted mechanical drug delivery systems and certain nuclear medicine residues such as Strontium-89 (Metastron) may create a hazardous condition when exposed to the heat of the cremation chamber and thus must be disclosed below: (description) _____

RCW 68.50.160 Right to control disposition of remains---Liability of funeral establishment or cemetery authority---Liability for cost.

(1) A person has the right to control the disposition of his or her own remains without the predeath or post-death consent of another person. A valid written document expressing the decedent’s wishes regarding the place or method of disposition of his or her remains, signed by the decedent in the presence of a witness, is sufficient legal authorization for the procedures to be accomplished.


(2) Prearrangements that are prepaid, or filed with a licensed funeral establishment or cemetery authority, under RCW 18.39.280 through 18.39.345 and chapter 68.46 RCW are not subject to cancellation or substantial revision by survivors. Absent actual knowledge of contrary legal authorization under the section, a licensed funeral establishment or cemetery authority shall not be held criminally nor civilly liable for actiong upon such prearrangements.


(3) If the decedent has not made a prearrangement as set forth in subsection (2) of this section or the costs of executing the decedent’s wishes regarding the disposition of the decedent’s remains exceeds a reasonable cost of preparation, care, and disposition of such remains devolves upon the following in the oreder named:

- (a) The person designated by the decedent as authorized to direct disposition as listed on the decedent’s United States department of defense record of emergency data, DD form 93, or its successor form, if the decedent died while serving in military service as described in 10 U.S.C. Sec. 1481 (a) (1)-(8) in any branch of the United States armed forces, United States reserve forces, or national guard;
- (b) The designated agent of the decedent as directed through a written document signed and dated by the decedent in the presence of a witness. The direction of the designated agent is sufficient to direct the type, place, and method of disposition;
- (c) The surviving spouse or state registered domestic partner;
- (d) The majority of the surviving adult children of the decedent;
- (e) The surviving parents of the decedent;
- (f) The majority of surviving siblings of the decedent;
- (g) A court-appointed guardian for the person at the time of the person’s death.

(4) If any person to whom the right of control has vested pursuant to subsection (3) of this section has been arrested or charged with first or second degree murder or first degree manslaughter in connection with the decedent’s death, the right of control is relinquished and passed on in accordance with subsection (3) of this section.

I hereby certify that I have the right to authorize this cremation and the disposition of the cremated remains. I further agree that I will indemnify and hold harmless Marlatt Funeral Home & Crematory from any claims to the contrary.

 Signature _____ Relationship _____
Printed name _____ Address _____
City _____ State _____ Zip _____ Phone _____

 Signature _____ Relationship _____
Printed name _____ Address _____
City _____ State _____ Zip _____ Phone _____

Funeral Home Representative _____ date _____

Signature of person to whom cremated remains were released  _____
Funeral Home Representative _____ date _____