

# Brooks Cremation and Funeral Service

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## Final Disposition Authorization

**FS 497.005 Definitions. (37) "Legally authorized person" means, in the priority listed, the decedent, when written inter vivos authorizations and directions are provided by the decedent; the surviving spouse, unless the spouse has been arrested for committing against the deceased an act of domestic violence as defined in s. 741.28 that resulted in or contributed to the death of the deceased; a son or daughter who is 18 years of age or older; a parent; a brother or sister who is 18 years of age or older; a grandchild who is 18 years of age or older; a grandparent; or any person in the next degree of kinship. In addition, the term may include, if no family member exists or is available, the guardian of the dead person at the time of death; the personal representative of the deceased; the attorney in fact of the dead person at the time of death; the health surrogate of the dead person at the time of death; a public health officer; the medical examiner, county commission, or administrator acting under part II of chapter 406 or other public administrator; a representative of a nursing home or other health care institution in charge of final disposition; or a friend or other person not listed in this subsection who is willing to assume the responsibility as the legally authorized person. Where there is a person in any priority class listed in this subsection, the funeral establishment shall rely upon the authorization of any one legally authorized person of that class if that person represents that she or he is not aware of any objection to the cremation of the deceased's human remains by others in the same class of the person making the representation or of any person in a higher priority class.**

**I understand the full import of this declaration, and I am emotionally and mentally competent to make this declaration. Pursuant to the legal authority given to me by Florida Statutes, I am hereby declaring that the final disposition of my human remains shall be by the method I have initialed below:**

\_\_\_\_\_ (Initial) Burial or Entombment in:

Cemetery Name: \_\_\_\_\_

City, State \_\_\_\_\_

\_\_\_\_\_ (Initial) Cremation

With Cremated Remains to be given to: \_\_\_\_\_

who shall have authority to have my remains released and arrange for it in lieu of  
any other person(s) if I have not already prearranged for it myself.

\_\_\_\_\_ (Initial) Anatomical Donation (if accepted)

If NOT accepted then by: \_\_\_\_\_

(Write out: Burial or Entombment, Cremation, or Sea Burial)

\_\_\_\_\_ (Initial) Sea Burial of Casketed Remains

X

Signature

Printed Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SS #: \_\_\_\_\_

**Witness: #1**

X

Signature

Printed Name

Address

City, State Zip

Phone

**Witness: #2**

X

Signature

Printed Name

Address

City, State, Zip

Phone