Gateway Crematory CR-297 1410 S. Acacia Ave. #D Fullerton, CA 92831 (714) 535-3715

Authorization for Cremation and Disposition of Human Remains

[Note: This is an important legal document which you should read carefully before signing.]

If you have any questions please ask your funeral Counselor and or,

"For more information on Funeral, Ceremony, and Cremation matters, contact:

Department of Consumer Affairs Cemetery and Funeral Bureau, 1625 North Market Blvd. Suite S-208 Sacramento, CA

95834

(916) 574-7870"

The Cremation Process is performed according to California Law. There can be no Allowance for ethnic or religious variation. Subject to the rules and regulations of Gateway Crematory and any applicable Federal, State, Local Laws, or Ordinances the undersigned hereby certifies, warrants and represents that I/We have the full legal right and authority to authorize Gateway Crematory (hereafter the "Crematory") to perform the cremation of the remains of:

[FIRST NAME]	[MIDDLE NAME]	[LAST NAME]
		Approximate Weight
[Decedents Usu	ıal Address]	
(Hereafter the "Deceased/Deceden	t"), and to arrange final disposition	of the cremated remains as follows:
Place of Final Disposition	******	
I hereby DECLINE to View the Decedent at the	Crematory; INITIAL	
I REQUEST a Viewing of the Decedent at the C	rematory; Date/Time	; INITIAL
ID,	Viewing or Witness the insertion	into the cremation chamber (Circle One)
Funeral Home handling the arrangements:LE	SNESKI MORTUARY	the Funeral Home)
meet the following standards: 1) be composed of complete covering for the human remains; 3) be to provide protection for health and safety of Container, including opening it if necessary. In directly for instructions. Metal, Plastic, Fiberg Crematory is authorized to remove and dispose deems appropriate. These may include, but not	of combustible materials suitable for resistant to leakage or spillage; 4) to crematory personal. The Crematory the event there is leakage or damaglass Caskets or Cremation Contagof handles, ornaments and any oth the limited to hinge, handles, latcher remains, the excess will be placed	tainer. All caskets and alternative containers must or cremation; 2) be able to be closed to provide a be sufficient for handling with ease; and 5) be able is authorized to inspect the casket or alternative ge, the Crematory may contact the Funeral Home ainers will not be allowed to be cremated. The ter non-combustible items in any lawful manner it s, etc. In the event the urn or other container is in a separate receptacle (plastic urn) at no charge. cording to the disposition on this form.
Casket or Cremation Container Selected	/ Ur	n Selected
implants in the decedent, may create a hazardour removed prior to cremation. If the Crematory is a person(s) authorizing the cremation will be held by such devices or implants. By initialing this p	s condition when placed in the crer not notified of these devices and im I responsible for any damages caus paragraph, I/We give permission to	s well as any mechanical or radioactive devices or nation chamber. It is imperative that such items be aplants, and not instructed to remove them, then the ted to Gateway Crematory personnel or equipment the Crematory, Funeral Home, or Staff to remove d or the Crematory are authorized to dispose of the
Dage	maker VES OR NO (Circle	e One) (INITIAL)

Deceased:		
combustible at the incineration chamber may be moved to fact during each cremation and the the cremation chamber, consist previous cremations, are removeracks and uneven places of the with State Laws. The acknowl Due to the nature of the cremated well as and body prostheses of container prior to cremation Crematory in accordance with arrangements to remove any cremation chamber, all non-conform the casket or containers as magnetic selection. Unless spention of the cremated with a similar materials with similar materials remain. There may be small not fragments. When the cremate bone fragment. After the bone fragment.	The Cremation Process: The casket, container, or other materials in the cremation chamber. Some bone fragments are not temperature and, as a result in the cremation chamber. During the cremation, the contents of the tate incineration. The chamber is composed of ceramic or other material which disintegrates slightly roduct of that disintegration is commingled with the cremated remains. Nearly all of the contents of the cremated remains that disintegration chamber material, and small amounts of residue from the dispersion of the cremated remains in the chamber. Periodically, the accumulation of this residue is removed and scattered at sea in accordance gement shall be filed and retained, for at least five years, by the person who disposes of the remains in process, any personal possessions or valuable materials such as dental gold or silver, or jewelry (a tental bridgework) that are left with the Decedent and are not removed from the casket or cremation as be destroyed and become non-recoverable, or if not destroyed, they will be handled by the instructions on the authorization. If you desire to save such items, the Authorizing Agent must make the possessions or valuables prior to cremation. After the cremated remains are removed from the abustible materials (insofar as possible), such as dental bridgework, body prostheses, and material has hinges, latches, etc., will be separated and removed from the human bone fragments by visible of a from other cremation in a non-recoverable manner, so that only the human bone fragments where the cremation has been enterial the operator may not visibly see and be placed in the urn with the human bore remains are removed from the cremation chamber, the skeletal remains often contain recognizable fragments have been separated from the other material, they will be mechanically processes thing particles unrecognizable as human remains, prior to placement into the designated container.	e y of n e e s. s n e e e e ls or se ll e le
(INITIAL)		
I/We understand that the serv released to the possession an permanently interred or picke Home is authorized to lawfull	to release the cremated remains of the Decedent to the possession and custody of the Funeral Homes and obligation of the Crematory shall be fulfilled when the cremated remains of the Decedent a custody of the Funeral Home. I understand that in the event the cremated remains have not been up by me or my designated representative within 20 days from the date of cremation, The Funeral dispose of the unclaimed remains of the Decedent as stated below: (Choose One) Deliver said cremated remains to:	re en
(INITIAL)	I appoint the Funeral Home as my agent to make shipment of said cremated remains via the U.S. Postal Service, I understand that the Funeral Home assumes No responsibility after delivery.	ie er
	SHIP TO:	_
(INITIAL)	RELEASE TO:	_
Authorizing Agent: An Autherizing Agent: An Autherizing Agent: An Autherize Partner, 4) Adult Cland Disposition, I/We acknow that the process of cremation this authorization. I/We agree assigns, harmless from any arperformance consistent with any delay in, or damage arisi causes of action in connection representations and statement	rizing Agent is the person(s) having the right to control the disposition of the Decedent pursuant (100.1.) Decedent, 2) An Agent under power of attorney for Health care, 3) Spouse or Register dren, 5) Parents, 6) Other surviving competent adult Kin. By signing this Authorization for Crematicage and agree that I/We have read and understood every part of this Authorization, including the fairreversible, and I/We nevertheless desire that the Deceased's remains be cremated in accordance we indemnify, release and hold Gateway Crematory, The Funeral Home, Their affiliates, Employees a all losses, damages, cost or expense resulting from the Funeral Home's and Crematory's reliance on ections, declaration, representation, authorization and agreements herein, including, but not limited a from the transportation of the human remains or cremated remains of the Decedent, and liability with the cremation and disposition of the cremated remains as authorized herein. I/We warrant that made herein are true and correct. I/We have either identified or waived my/our rights of identification and the Funeral Home as the Decedent and I/We have authorized the Funeral Home to deliver the remains of the remains of the remains of the Polyana remains of the Polyana remains of th	ed on act ith nd or to, or all
Signature of Authority 4	Relationship	
	Phone #	
rinted Name:	1 HORE #	_