

PLANET GREEN CREMATIONS®

319 East Glenwood-Lansing Road
Glenwood, Illinois 60425
888-777-5657

Authorization for Cremation

The undersigned hereby authorizes Planet Green Cremations° and Heights Crematory and or its agents, to arrange for the Cremation of:

Deceased

Passed away at _____ AM PM Date ___/___/___

I (we) hereby represent that I am (we are) of the same and nearest degree of the relationship to the deceased and are legally authorized or charged with the responsibility for disposition of his/her body after cremation. I (we) agree to hold harmless Planet Green Cremations°, its officers, agents and employees from any and all claims, suits or causes of actions arising out of the cremation and final disposition of the cremated remains. Unless arrangements are made directly with a funeral home, cemetery or crematory for the final disposition of Cremated remains within 30 days, (we) shall call for the cremated remains from Planet Green Cremations°, within 60 days and after that time said Planet Green Cremations° will have no responsibility for the cremated remains and may dispose of any said Cremated remains in any lawful manner. Planet Green Cremations° warrants that the human remains released to Heights Crematory are the same as those identified herein.

Pacemaker Yes No

Authorize Removal of Pacemaker Initial _____

Infectious Disease Yes No

Final Disposition of cremains shall be: () Released to Family () Ship

I, _____, hereby certify that I am the closest living relative or next of kin of: _____, deceased. I further certify that no other relative or party in interest has objected to this cremation.

Signature of Authorizing Agent Print Name Relationship Date

Address Telephone Number

NOTARY

Subscribed and Sworn before me this _____ Day of _____, 20_____

_____ My Commission Expires _____

Please fax back to 312-276-4498 or email to cremationfax@yahoo.com

**** Do NOT give paperwork to drivers! ****