

Cremation Authorization and Disposition Authorization

Notice: This is a legal document that contains important provisions concerning cremation. Read this entire document carefully before signing. Cremation is an irreversible and final process.

Name of person to be cremated: _____

Date of Death: _____ **Time of Death:** _____ **Place of Death:** _____

Definition; Authorizing Agent(s) is a person legally entitled to authorize the cremation of human remains.

Oregon Statutes 97.130 (1) Any individual of sound mind who is 18 years of age or older, by completion of a written signed instrument or by preparing or prearranging with any funeral service practitioner licensed under ORS chapter 692, may direct any lawful manner of disposition of the individual's remains. Except as provided under subsection (7) of this section, disposition directions or disposition prearrangements that are prepaid or that are filed with a funeral service practitioner licensed under ORS chapter 692 are not subject to cancellation or substantial revision.

(2) A person within the first applicable listed class among the following listed classes that is available at the time of death, in the absence of actual notice of a contrary direction by the decedent as described under subsection (1) of this section or actual notice of opposition by completion of a written instrument by a member of the same class or a member of a prior class, may direct any lawful manner of disposition of a decedent's remains by completion of a written instrument:

- (a) The spouse of the decedent.
- (b) A son or daughter of the decedent 18 years of age or older.
- (c) Either parent of the decedent.
- (d) A brother or sister of the decedent 18 years of age or older.
- (e) A guardian of the decedent at the time of death.
- (f) A person in the next degree of kindred to the decedent.
- (g) The personal representative of the estate of the decedent.
- (h) The person nominated as the personal representative of the decedent in the decedent's last will.
- (i) A public health officer.

(3) Intentionally left blank —Ed. **(a)** The decedent or any person authorized in subsection (2) of this section to direct the manner of disposition of the decedent's remains may delegate such authority to any person 18 years of age or older. **(b)** Delegation of the authority to direct the manner of disposition of remains must be made by completion of: **(A)** The written instrument described in subsection (8) of this section; **or (B)** The form described in subsection (4) of this section. **(c)** The person to whom the authority is delegated has the same authority under subsection (2) of this section as the person delegating the authority

(4) Intentionally left blank —Ed. **(a)** A Record of Emergency Data, DD Form 93, or a successor form recognized by the Armed Forces of the United States, as that term is defined in ORS 366.931 (Roadside memorial signs), completed by a member of the Armed Forces of the United States serves as a valid written instrument for purposes of subsection (3) of this section. **(b)** In accordance with United States Department of Defense Instruction 1300.18, a member of the Armed Forces of the United States shall complete the form described in this subsection and shall verify the accuracy of the form at least annually. **(c)** The form described in this subsection, regardless of the date on which the form was signed, supersedes any other written instrument that directs the disposition of the decedent's remains.

(5) Except as provided in subsection (4)(c) of this section, if a decedent or the decedent's designee issues more than one authorization or direction for the disposal of the decedent's remains, only the most recent authorization or direction is binding.

(6) A donation of anatomical gifts under ORS 97.951 (Short title) to 97.982 (Alteration of document of anatomical gift prohibited) takes priority over directions for the disposition of a decedent's remains under this section only if the person making the donation is of a priority under subsection (1) or (2) of this section the same as or higher than the priority of the person directing the disposition of the remains.

(7) If the decedent directs a disposition under subsection (1) of this section and those financially responsible for the disposition are without sufficient funds to pay for such disposition or the estate of the decedent has insufficient funds to pay for the disposition, or if the direction is unlawful, the direction is void and disposition shall be in accordance with the direction provided by the person given priority in subsection (2) of this section and who agrees to be financially responsible.

(8) The signature of the individual delegating the authority to direct the manner of disposition is required for the completion of the written instrument required in subsection (3)(b)(A) of this section. The following form or a form substantially similar shall be used by all individuals:

I/We the Authorizing Agent hereby authorize and request in accordance with and subject to the rules and regulations and any applicable laws or regulations for Waud's Funeral Home (The "Funeral Home") or any agent of the funeral home, to arrange with Tillamook Crematory or any other crematory (_____) due to maintenance of crematory, location of crematory, and the size and weight of person being cremated, (the "Crematory") to cremate the human remains of _____ (the "Decedent") and to arrange for the final disposition of the cremated remains.

I/We hereby certify that there is no other person or persons having the right to control disposition for cremation.

Signature of Authorizing Agent(s) _____ **Relationship** _____

Signature of Authorizing Agent(s) _____ **Relationship** _____

Cremation Process:

Oregon Chapter 97 ORS 97.010. (12) "Cremated remains" means the remains of a cremated human body after completion of the cremation process. (13) "Cremation" means the technical process, using direct flame and heat that reduces human remains to bone fragments. (14) "Crematory" means a structure containing a retort for the reduction of bodies of deceased persons to cremated remains. If you need more information regarding cremation, please contact the Oregon State Cemetery and Mortuary Board.

Cremation is performed to prepare the deceased for memorialization and it is carried out by placing the deceased in a combustible casket or alternative container and then placing the casket or alternative container into the cremation chamber, or retort, where they are subjected to intense heat and flame. During the cremation process, it may be necessary to open the cremation chamber and reposition the deceased in order to facilitate a complete and thorough cremation. Through the use of suitable fuel, incineration of the container and its contents is accomplished by raising the temperature substantially (extreme temperature) and all substances are consumed or driven off, except bone fragments (calcium compounds) and metal (including dental gold and silver and other non-human materials) as temperature is not sufficient to consume them. Due to the nature of the cremation process, any personal possessions or valuable materials such as dental gold and silver, or jewelry (as well as any prostheses or dental bridgework) that are left with the decedent and not removed from the casket or container prior to cremation may be destroyed and become non-recoverable. If not destroyed, the funeral home and its employees, are authorized to dispose of such material at its sole discretion. The Authorizing Agent(s) understands the arrangements must be made with the Funeral Home to remove any such possessions or valuables prior to the time that the Decedent is transported to the Crematory.

Following a cooling period, the cremated remains, which will normally weigh several pounds in the case of an average-size adult, are then swept or raked from the cremation chamber. The crematory makes a reasonable effort to remove all the cremated remains from the cremation chamber, but it is impossible to remove all of them, as some dust and other residue from the process are always left behind. In addition, while every reasonable effort will be made to avoid commingling, inadvertent or incidental commingling of minute particles of cremated remains from the residue of previous cremations is a possibility, and the Authorizing Agent(s) understands and accepts this fact.

After the cremated remains are removed from the cremation chamber, all non-combustible materials (insofar as possible) such as dental bridgework, and materials from the casket or container, such as hinges, latches, nails, etc, will be separated and removed from the human bone fragment by visible or magnetic selection. The Crematory is authorized to dispose of these materials with similar materials from other cremations in a non-recoverable manner, so that only the human bone fragments will remain. When the cremated remains are removed from the cremation chamber, the skeletal remains often contain recognizable bone fragments. Unless otherwise specified, after the bone fragments have been separated from the other material, they will be mechanically processed (pulverized), which includes crushing or grinding and incidental commingling of the remains with the remains with the residue from the processing of previously cremated remains, into granulated particles of unidentifiable dimensions, virtually unrecognizable as human remains, prior to placement into the designated container. After the cremated remains have been processed, they will be placed into a designated urn or container. If the urn or container is not large enough to house all the cremated remains, a second container will be used and kept with the primary urn.

Time of Cremation

The crematory will perform the cremation upon receipt of the decedent, at its discretion and according to its time schedule, as work permits.

I/We Authorizing Agent(s) have read and understand this disclosure concerning the Cremation Process.

Initials of Authorized Agent(s) _____

Mechanical, radioactive devices or implants in the decedent may create a hazardous condition when placed in the cremation chamber and must be removed prior to delivery of the decedent to the crematory.

To your knowledge, do the decedent's remains contain any such device(s)/implants? YES ___ NO ___

I/We the Authorizing Agent(s), authorize the removal of any such devices by the funeral home and its employees.

Initials of Authorized Agent(s) _____

Waud's Funeral Home & Tillamook Crematory 1414 3rd ST. Tillamook, OR 97141 (503) 842-7557

Note: Any urn that is to be shipped will be shipped U.S. Postal Service: Registered Mail/Return Receipt.

Type of Urn to be used; A) Black Plastic _____ B) Other _____

C) Keepsake(s) _____ D) Jewelry _____

Disposition A) Any family member to pick up _____
B) Specific persons authorized to pick up _____
C) Cemetery/Other instructions _____

Authorization

I / We therefore state that:

- a) I am/We are the closest living next of kin of the Decedent or;
- b) I am/We are otherwise empowered and authorized to execute this authorization according to all state and local laws by reason of _____ (example: Personal Representative)

I / We are aware of no objections to this cremation by the spouse, any child, parent or sibling of the Decedent, or of provisions of any contract or instruction made by the Decedent.

I / We have either identified or waived my/our rights of identification as noted above of the human remains that were delivered to the Funeral Home as the Decedent and I/We have authorized the funeral home to deliver the Decedent to the Crematory.

I / We hereby agree to indemnify and hold harmless the Funeral Home and the Crematory, their officers, directors, agents and employees, from any claim, liability, cost or expense resulting from the Funeral Home's and the Crematory's reliance on or performance consistent with the directions, declarations, representations, authorizations and agreements herein, including, but not limited to, any delay in, or damage arising from the transportation of the human remains or cremated remains of the Decedent.

By execution of the form below and initials at appropriate spaces for Authorized Agent(s) of this three page form, the undersigned(s) warrant(s) that all representations and statements contained in this form are true and correct. That these statements are being relied on by the Funeral Home and the Crematory and that the undersigned has/have read and understood the provisions of this document.

Signature: _____

Print: _____

Date & Time: _____

Phone # _____

Signature: _____

Print: _____

Date & Time: _____

Phone # _____

FD/FSP License # _____ Sign: _____ Print: _____

If not witnessed by a Funeral Director, this form must be signed in front of a notary or a photo copy of the Authorized Agent(s) driver's license, photo I.D. or Passport be provided to Waud's Funeral Home.

State of _____

County of _____

I am a Notary Public and I hereby confirm that _____ Whose signature is set forth above as Authorizing Agent, executed this cremation authorization.

Subscribed to and sworn before me the _____ day of _____, 20____

Signature _____

(SEAL)