

1347 Hammond St. Bangor, ME 04401 Tel 207-942-3822 Fax 207-942-4499

www.pinegrovecrematorium.com

### AUTHORIZATION FOR CREMATION AND DISPOSITION

subject to its rules and regulations and any applicable state or local laws or regulations,	torium ("PGC"), in accordance with and
(the "Decedent") and to arrange the f	to cremate the human remains of
as set forth on this form.	mai disposition of the elemated femalis,
I have identified the human remains that were delivered to the funeral home as the Decedent, and have at Decedent to PGC for cremation. Otherwise, I have elected to waive the right to identify the human remains a	
* Where Asterisk is Please Initial as Acknowledgement	* Initials of AP
IDENTIFICATION	
Date of Death Time of Death AM/PM Place of Death, City, Town, Twp County Sex Race Age Date of Birth	
Place of Death, City, Town, TwpCounty	State
Sex Race Age Date of Birth	
Did the death occur from an infectious, contagious, communicable disease?  If yes, please describe:	Yes [ ] No [ ]
Please check any that are present which must be removed prior to cremation to prevent damage to the cremat the cremation:   Pacemaker   Defibulator   Prostheses   Silicone Implants   Radioactive Implants (incl. "s	
All pacemakers, prostheses, plastic casts, silicone and radioactive implants must be removed prior to	to delivering the Decedent to PGC
	o delivering me Decedem to 1 Ge
I have authorized and instructed the funeral home to remove or arrange for the removal of these devices and the Decedent to PGC in any manner in which the funeral home deems appropriate.	
	to dispose of them prior to transporting  * Initials of AP  ESS

# FAMILY-WITNESSED CREMATION

previously cremated remains. These granulated particles will be virtually unrecognizable as human remains.

them, as some dust and other residue from the process is always left behind. In addition, while every effort is made to avoid commingling, inadvertent or incidental commingling of minute particles of cremated remains from the residue of previous cremations is possible. After the cremated remains are taken from the retort, all non-combustible materials (insofar as possible) are separated and removed from the human bone fragments by visible or magnetic selection and are disposed of in a non-recoverable manner. The cremated remains are then mechanically processed (pulverized). This process of crushing or grinding may cause incidental commingling of the remains with residue coming from the processing of

Pine Grove Crematorium of	ffers families the option of having a Family-Witnessed Cremation	. This offers families the peace of mind of being present
for the cremation process.	Family-witnessed cremations require advanced scheduling and a	are performed under the direction of the funeral director
arranging for the cremation	A family-witnessed cremation is an additional charge and an up	ograded cremation container is suggested.

	 3.7	
Yes	No	
ICO	 110	

\* Initials of AP

In the event that a family-witnessed cremation is declined, PGC is authorized to perform the cremation upon receipt of the human remains, without obtaining any further authorization or instructions.

\* Initials of AP \_\_\_\_\_\_

## DISPOSITION OPTIONS

SIGNATURE OF AUTHORIZING PERSON(S)  THIS IS A LEGAL DOCUMENT. IT CONTAINS IMPORTANT PROVISIONS CONCERNING CREMATION. CREM IRREVERSIBLE AND FINAL. READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. Facsimile signatur legally binding and accepted the same as original signatures.  By executing this Cremation Authorization Form, as Authorizing Person(s), the undersigned warrants that all represent statements contained on this form are true and correct, that these statements are made to induce PGC to cremate the human the Decedent, and that the undersigned have read and understand the provisions contained on this form.  Executed at	MATION IS res shall be attations and a remains of
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his/her or that I otherwise serve (served) in the capacity of to the Dec I have charge of the remains of the Decedent and as such possess full legal authority and power, according to the laws of the Maine, to execute the authorization form and to arrange for the cremation and disposition of the cremated remains of the Dama ware of no objection to this cremation by any spouse, child, parent or sibling. I understand that I am personally and in responsible and liable for all damages occasioned by and resulting from the execution of this authorization.  **LIMITATION OF LIABILITY**  As the Authorizing Person, I hereby agree to indemnify, defend, and hold harmless PGC, its directors, officers, agents, emprepresentatives, of and from, any and all claims, demands, causes or causes of action, losses, damages or liabilities arising of, based upon, or connected with this authorization, including the failure to properly identify the Decedent or the huma transmitted to PGC; the arrangement of cremation, cremation of human remains or release or disposal of cremated relocation or disposition of any valuables delivered to PGC with human remains; any damage due to harmful or explodable in processing, shipping and final disposition of the Decedent's cremated remains; any claims brought by any other person(s) claims to control the disposition of the Decedent or the Decedent's cremated remains; refusal to accept a body, material agreements, perform cremation, or release or dispose of remains, if PGC becomes aware of any dispute concerning cremains, any reasonable basis for questioning the representations of the Authorizing Person, any dispute concerning cremains, any reasonable basis for questioning the representations of the Authorizing Person, any dispute concerning	ployees and g as a result tan remains; the mplants; the laiming the take proper remation of
AUTHORITY OF AUTHORIZING PERSON(S) I, the undersigned, hereby certify that I am the closest living next of kin of the Decedent and that I am related to the D	Decedent as
Delivery of cremated remains requires a shipping urn at an additional charge.  * Initials of AP _	
☐ Deliver the cremated remains via United States Postal Service, Registered Mail, Return Receipt Requested, Insured	d Mail to:
= beniver the elemented femalities to the famous from the managing for services.	
□ Deliver the cremated remains to the funeral home arranging for services.	
Monday through Friday, from 8:00 a.m. to 5:00 p.m. for five days following the date of cremation, after which time they will be to the funeral home arranging for services.	
to the funeral home arranging for services.	g by the AP,

PGC does not accept metal caskets. All wooden caskets and alternative containers must meet the following standards: 1) be composed of ridged materials suitable for cremation; 2) be able to be closed to provide a complete covering for the human remains; 3) be resistant to leakage or spillage; 4) be sufficient for handling with ease; and 5) be able to provide protection for the health and safety of crematory personnel.

#### NOTICE CONCERNING URNS/CONTAINERS

After the cremated remains have been processed, they will be placed in the designated urn or container. PGC will make a reasonable effort to put all of the cremated remains in the urn or container, with the exception of dust or other residue that may remain on the processing equipment. In the event the urn or container provided is insufficient to accommodate all of the cremated remains, the excess will be placed in a separate receptacle. The separate receptacle will be kept with the primary receptacle and handled according to the disposition instructions on this form.