

**AUTHORITY TO CREMATE
LENEDA, INC.**

The undersigned hereby certifies that he/she/they, has/have the right to Control the disposition of the remains of: _____, deceased person.

DATE OF BIRTH _____ DATE OF DEATH _____

Pursuant to the provisions of California Health & Safety Code Section 7100. I/We hereby authorize and request LENEDA, INC. to cremate the remains of the above named deceased person and scatter the ashes at sea by boat within sixty [60] days of the date of cremation or release the cremated remains to

_____ for final disposition by _____

Should the person or persons entitled to the custody and control of the disposition of the cremated remains not call for, or lawfully dispose of, or accept the cremated remains within ninety [90] days of the date of death, LENEDA, INC. will make final disposition of the cremated human remains by burial, entombment or inurnment with a licensed cemetery authority. I/We hereby agree to indemnify and hold LENEDA, INC., harmless for any costs associated with such disposition.

_____ ***Initial***

The human body burns with the casket, container, or other material in the cremation chamber. Some bone fragments are not combustible at the incineration temperature and, as a result remain in the cremation chamber. During the cremation, the contents of the chamber may be moved to facilitate incineration. The chamber is composed of ceramic or other material which disintegrates slightly during each cremation and the product of that disintegration is commingled with the cremated remains. Nearly all of the contents of the cremation chamber, consisting of the cremated remains, disintegrated chamber material, and small amounts of residue from previous cremations are, removed together and crushed, pulverized, or ground to facilitate inurnment or scattering. Some residue remains in the cracks and uneven places of the chamber. Periodically, the accumulation of this residue is removed and interred in a dedicated cemetery property, or scattered at sea.

Certain items, including, but not limited to body prostheses, dentures, dental bridgework, jewelry, dental gold or silver or mementos may not be destroyed by this cremation process and I/We hereby request that it be separated from the cremated remains and authorize LENEDA, INC., to dispose of it in such manner as it deems advisable. _____ ***Initial***

The cremated remains will be processed to fragments of less than 5 millimeters in diameter. Processing is accomplished by mechanical grinding and crushing procedure. Following processing, all recoverable cremated remains will be placed in a temporary container or in the urn ordered by you. A person having the right to control disposition of cremated remains may remove the remains in a durable container from the place of cremation or interment, pursuant to Section 7054.6 of the Health and Safety Code. If the cremated remains container cannot accommodate all cremated remains of the deceased, the crematory shall provide a larger cremated remains container at no additional cost, or place the excess in a second container that cannot easily come apart from the first, pursuant to Section 8345 of the Health and Safety Code. _____ ***Initial***

Pursuant to California Business and Professions code Section 9784.5, LENEDA, INC., prohibits relatives or the responsible party from viewing the cremation process.

I understand that surgically implanted devices which may or may not contain power sources, such as pacemakers, must be removed from the body prior to the cremation process because of the possibility of explosion. I therefore have given instructions to remove such devices prior to cremation. I agree to be liable for any damage to the crematory or injury to personnel in the event of my failure to properly effect such removal.

I agree to pay the regular fees of LENEDA, INC. for the cremation, disposition and any other services rendered.

For more information on funeral, cemetery and cremation matters, contact: department of consumer affairs, Cemetery and funeral bureau, 1625 N. Market Blvd., Suite S-208 Sacramento, CA 95834, Telephone Number (916) 574-7870.

SIGNED _____ RELATIONSHIP _____ DATE _____

PRINT OR TYPE NAME _____ TELEPHONE _____

ADDRESS _____ CITY _____ STATE/ZIP _____