

STATE OF OREGON
County of _____
Date _____

CENTRAL LINN CREMATORY, L.L.C.

OR ID# _____
Crematory # _____

CREMATION AUTHORIZATION

I hereby authorize and direct Central Linn Crematory, subject to its terms and conditions (see below), to cremate the remains of: _____ My relationship to the deceased is that of: _____

Upon my oath, and under penalty of perjury, I hereby swear and affirm that to the best of my knowledge there is no other person having a prior right to give this authorization per Oregon Revised Statutes 97.130 (see below), and to control the remains of the above named Decedent. I hereby agree to hold the above named crematorium, the funeral director, or person acting as such, their officers and employees harmless from liability, cost and expense resulting from this authorization. I further understand that the cremation process is subject to the following terms and conditions.

DISCLOSURES, TERMS & CONDITIONS.

1. _____ (Initials) The body presented to Central Linn Crematory, L.L.C. is that of the named deceased.
2. _____ (Initials) The deceased _____ HAS _____ HAS NOT been fitted with a heart pacemaker. If the Decedent has been fitted with a heart pacemaker, I authorize you to remove the pacemaker and dispose of it in such manner as you determine.
3. _____ (Initials) The deceased _____ HAS _____ HAS NOT been treated with Strontium-89 in the last 6 months.
4. _____ (Initials) I certify that all personal possessions of value to the family have been removed from the Deceased. All prosthesis (hip joints, surgical pins, etc.) bridgework or similar items will be discarded after the cremation process is completed. Gold inlays and fillings, rings and other jewelry will lose their identity and will also be discarded.
5. For sanitation purposes it is the policy of Central Linn Crematory that the body be placed in a rigid container. Fiberglass and Metal Caskets are not accepted.
6. Pulverizing of the cremated remains by crushing and grinding is part of the normal process involved in preparing the cremated remains, however, some of the remains may be recognized as particular bone fragments.
7. The bulk of the pulverized cremated remains will be returned; however, some will be lost during processing and containerization.
8. If shipment of cremated remains is required, I direct they be shipped via registered mail, return receipt requested, or other transportation services.
9. Central Linn Crematory is not responsible for any loss or delay of ashes by the U.S. Postal Service or other transportation services.
10. The obligation of Central Linn Crematory shall be limited to the cremation of the remains of the Deceased and the disposition of the cremated remains as directed. The Authorized Representative(s) agree to release and hold the company, its affiliates and their agents, employees and assigns, harmless from any and all loss, damages, liability or cause of action (including attorneys fees and expenses of litigation) in connection with the cremation and disposition of the cremated remains as authorized or the failure of the Authorized Representative(s) to identify properly the remains of the Deceased or take possession of or make permanent arrangement for the disposition of such remains. No warranties expressed or implied are made and damage shall be limited to the refund of the cremation fee paid.

OREGON REVISED STATUTES 97.130

97.130 Right to control disposition of remains:

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 (6) 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 shall not be 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 or, 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.

DISPOSITION OF CREMATED REMAINS

_____(Initial) Cremated remains are to be sent to: _____
Address: _____

_____(Initial) Cremated remains will be called for by: _____

_____(Initial) Other: _____

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE.

This authorization must be signed in the presence of a funeral director, or person acting as such or be notarized.

Signature: _____ / Print Name: _____ / Relationship: _____ / Date: _____

Time: _____ / Phone: _____ / Address: _____

Signature: _____ / Print Name: _____ / Relationship: _____ / Date: _____

Time: _____ / Phone: _____ / Address: _____

Funeral Director/witness: _____

Funeral Home: _____

Notary Public _____

My Commission Expires _____