

# Duzak

## Funeral and Cremation Center

16600 West Warren Avenue  
Detroit, Michigan 48228  
www.duzakcremation.com

Toll Free: (800) 331- 5051

Fax: (313) 584 – 8536

Email: [info@duzakcremation.com](mailto:info@duzakcremation.com)

Al, Chris & Noah Duzak, Director's

**Please read carefully, as this important information pertains to the cremation process and our business policy.**

**Note that having power of attorney does not grant the right to handle disposition or authorize cremation.**

### **THE CREMATION PROCESS**

In order for cremation to take place for all funeral homes in the State of Michigan, proper next of kin or kins need to sign the cremation paperwork. The next of kin is as follows in order of priority. Funeral Representative, Spouse, Majority of biological children over the age of 18, Majority of biological grandchildren over the age of 18, Biological parents, biological grandparents, Majority of biological brothers and sisters over the age of 18, any biological nephew, niece, uncle, aunt, cousin over the age of 18.

Once we receive the completed and signed forms, we obtain a signed death certificate by the attending physician, PCP, hospice doctor or medical examiner. This is required before the cremation will take place. It is required by law that the county medical examiner issues a cremation permit, and the county medical examiner won't issue a cremation permit until the death certificate is signed.

Please note, it takes up to 48 hours to obtain a signed death certificate and 24 to 48 hours to obtain the cremation permit. Please allow 5 to 7 business days for the cremation to take place.

### **CERTIFIED COPIES OF THE DEATH CERTIFICATE**

Once the death certificate is signed, we will email over a file copy for the family to review. Please review it carefully as once it's filed, if you approved it with any inaccuracies, you will be responsible for charges to correct it along with copies of the new death certificates. Once approved by the family, we will file it electronically and the death certificates will be ready for pick up with the cremated remains. If you are need of the death certificates sooner, we advise you order them on your own directly from the clerk's office.

### **PERSONAL PROPERTY**

Duzak Funeral & Cremation Center, Inc. accepts no responsibility for any personal effects that are given to us by a third party (hospital, nursing home, medical examiner, etc.) and cremated with the body. Personal effects for example are clothes, jewelry, etc. If you suspect the deceased may have personal effects, please notate it on the release form so we can check for you. If we are in possession of any personal effects, we will return them to you if you wish. We do not return clothes given to us from a medical examiner's office. Please note shipping costs will apply for items that aren't shipped with the cremated remains.

### **PAYMENT POLICY FOR SERVICES**

Payment for services is due in full at the time our funeral home receives the completed paperwork or at the time of arrangements.

We accept all major credit cards, money orders, and cash.

We do not currently offer payment plans or make claims to receive payment from life insurance companies.

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### Authorization to release the remains of:

Deceased: \_\_\_\_\_

\_\_\_\_\_  
Location where death occurred

\_\_\_\_\_  
Approximate weight

\_\_\_\_\_  
Please list any jewelry that may need to be removed, or property we need to be aware of

I/we authorize the remains of the individual stated above to be released to the Duzak Funeral & Cremation Center, Inc. along with any personal effects.

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Relationship to deceased: \_\_\_\_\_

Date signed: \_\_\_\_\_

*Note: Transportation outside of a 35 mile radius from our funeral home will incur a \$3.00 per mile charge 1 way.*

# Authorization for cremation

## Duzak Funeral and Cremation Center

16600 West Warren Avenue, Detroit, Michigan 48228

1 800 331 5051 – Phone

1 313 584 8536 - Fax

[info@duzakcremation.com](mailto:info@duzakcremation.com) – Email

**Cremation will take place in Detroit, Taylor, Livonia, or Royal Oak**

Deceased: \_\_\_\_\_

Does the deceased have a pacemaker (\$25 extraction fee)	YES	NO	
Any jewelry or personal property on the deceased	Cremate	Return to family	None
Obtain thumbprints before cremation (\$10 charge)	YES	NO	
Obtain lock of hair before cremation (\$10 charge)	YES	NO	
Viewing of the body before cremation (additional charges will apply)	YES	NO	

1. Signature \_\_\_\_\_ Print: \_\_\_\_\_  
Relationship to deceased \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

2. Signature \_\_\_\_\_ Print: \_\_\_\_\_  
Relationship to deceased \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

3. Signature \_\_\_\_\_ Print: \_\_\_\_\_  
Relationship to deceased \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

4. Signature \_\_\_\_\_ Print: \_\_\_\_\_  
Relationship to deceased \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

5. Signature \_\_\_\_\_ Print: \_\_\_\_\_  
Relationship to deceased \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

I (WE) the signed (the "Authorizing Agent(s)"), herby state that we are the sole next of kin to authorize cremation and there is no other next of kin that supersedes our authority

I (WE) the signed (the "Authorizing Agent(s)"), have authorized the human remains that were delivered to the DUZAK FUNERAL & CREMATION CENTER, Inc. be delivered to either Meadowcrest Memorial Crematory, Southern Michigan Services, or Serenity Cremation Services for cremation.

I (WE) the signed (the "Authorizing Agent(s)"), herby authorize and request either Meadowcrest Memorial Crematory, Southern Michigan Services or Serenity Cremation Services in accordance with and subject to any state/provincial or logical laws or regulations, to cremate the human remains of the decedent stated on this document

I (WE) the signed (the "Authorizing Agent(s)"), have read the attached document.

### Limitation of Liability

As the authorizing Agent(s), I (We) herby agree to indemnify, defend, and hold harmless the Duzak Funeral & Cremation Center, Inc. of Detroit, Michigan, Meadowcrest Memorial Crematory of Detroit, Michigan, Southern Michigan Services of Livonia and Royal Oak, Michigan, or Serenity Cremation Services of Taylor, Michigan its officers, agents and employees, of and from any and all claims, demands, causes or causes of action, and suits of every kind, nature and description, in law or equity, including any legal fees, costs and expenses of litigation, arising as a result of, based upon or connected with this authorization, including the failure to properly identify the decedent or the human remains transmitted to the Meadowcrest Memorial Crematory of Detroit, Michigan, Southern Michigan Services of Livonia and Royal Oak, Michigan, or Serenity Cremation Services, of Taylor, Michigan the processing, shipping and final disposition of the decedent's cremated remains, the failure to take possession of or make proper arrangements for the final disposition of the cremated remains, any damage due to harmful or explodable implants, claims brought by any other persons claiming the right to control the disposition of the decedent or the decedent's cremated remains, or any other action performed by the Duzak Funeral & Cremation Center, Inc. of Detroit, Michigan, Meadowcrest Memorial Crematory of Detroit, Michigan or Southern Michigan Services of Livonia and Royal Oak, Michigan, or Serenity Cremation Services of Taylor, Michigan its officers, agents or employees, pursuant to this authorization, excepting only acts of willful negligence.

Cremation Number (Crematory Fills in) \_\_\_\_\_  
Date of Cremation (Crematory Fills in) \_\_\_\_\_

\_\_\_\_\_  
Signature of Funeral Director as Witness for signatures(s) of Authorizing Agent(s)  
Duzak Funeral & Cremation Center, Inc. 16600 West Warren-Detroit, MI 48228

# Duzak

## Funeral and Cremation Center

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Detroit, MI 48228-3502

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Al, Chris & Noah Duzak, Director's

### Authorization for disposition of cremated remains

Name of deceased: \_\_\_\_\_

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

Relationship to deceased: \_\_\_\_\_

Date signed: \_\_\_\_\_

### Please check one option below

1. Pick up at the funeral home

If the cremated remains are not picked up within 6 months from the date of cremation, the cremated remains will be turned over to Our Lady of Hope Cemetery located in Brownstown, Michigan. The cremated remains will not be returned once in possession of Our Lady of Hope Cemetery. Please make every effort to coordinate pick up.

Please list below who is authorized to pick up the cremated remains.

\_\_\_\_\_

2. Deliver cremated remains to our residence or cemetery

\$50 delivery fee within 35 miles from our funeral home

Address \_\_\_\_\_

3. Mail to a Residence

\$50 service fee, postage will be charged when cremated remains are shipped

Address \_\_\_\_\_

4. We do not want the cremated remains back

We the family of the above stated authorize the Duzak Funeral and Cremation Center, Inc. of (16600 West Warren Ave.-Detroit, Michigan 48228) the Right and Authority to arrange for the final disposition of the cremated remains of the individual stated above. We understand that if this option is selected, the cremated remains will be taken to Our Lady of Hope Cemetery located at 18303 Allen Rd, Brownstown Charter Twp, MI 48193 for burial and will not be returned once Our Lady of Hope has possession of them. I/we do hereby hold harmless the Duzak Funeral & Cremation from liability.

**Information for the death certificate** Amount of death certificates needed (certified copy prices vary) \_\_\_\_\_

Full name of deceased \_\_\_\_\_

Male  Female

Date of birth \_\_\_\_\_

Date of death \_\_\_\_\_

Age \_\_\_\_\_

Location of death \_\_\_\_\_

Last known mailing address \_\_\_\_\_

City & state of birth \_\_\_\_\_

Social security number \_\_\_\_\_

Highest level degree earned in school or highest grade completed \_\_\_\_\_

Race \_\_\_\_\_

Ancestry if known \_\_\_\_\_

Hispanic origin Yes  No

Veteran Yes  No

Occupation done most of their life \_\_\_\_\_

Business or industry they worked in \_\_\_\_\_

Marital Status Married  Widowed  Divorced  Never Married  Separated

Surviving spouse full name (wife full maiden name) \_\_\_\_\_

Father's name of the deceased \_\_\_\_\_

Mother's name of the deceased, include maiden name \_\_\_\_\_

Person providing info \_\_\_\_\_

Relationship to deceased \_\_\_\_\_

Mailing Address \_\_\_\_\_

I \_\_\_\_\_ hereby confirm the information I have given is correct to the best of my knowledge

Email to send proof: \_\_\_\_\_

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Al, Chris & Noah Duzak - Directors

Payment for : \_\_\_\_\_

### ***Selection of services***

Direct cremation with standard cremation container	\$995.00
Direct cremation with cremation container accommodating a 250 to 280 lb. individual	\$1,095.00
Direct cremation with cremation container accommodating a 280 to 350 lb. individual	\$1,195.00
Family being present for committal service at the location of cremation <i>*Limited to 10 people, viewing of the body is at the discretion of the funeral director</i>	\$300.00
Obtain prints before cremation <i>(At discretion of funeral director)</i>	\$10.00
Obtain lock of hair before cremation <i>(At discretion of funeral director)</i>	\$10.00
Printed facial picture of the deceased <i>(Only available if deceased is in viewable condition)</i>	\$100.00
Removal of the pacemaker or defibrillator	\$25.00
Deliver cremated remains to residence or cemetery, within 35 miles:	\$50.00
Mail cremated remains, postage will be charged separately when shipped:	\$50.00

### ***Selection of merchandise***

Urn type:	Plastic (Included)	Wood \$100.00	Bronze metal \$150.00
Silver tube necklace:			\$25.00 a piece Amount needed _____
Scattering tube:			\$25.00 a piece Amount needed _____
Family will provide their own urn or jewelry: # of items _____			\$25.00 for 5 items, \$5.00 per item after
Memory cards:	\$50.00 for 25 cards	\$75.00 for 50 cards	\$100.00 for 75 cards \$125.00 for 100 cards

Person to contact for payment: \_\_\_\_\_

Phone: \_\_\_\_\_

***Once we receive the completed paperwork, we will call same day or following day to process payment.***