



ASCENSION REFLECTION CREMATION SERVICES, INC.
 37105 Industrial Rd • Livonia • MI 48150
 ph 734-855-4523 • fax 734-822-0090

FINAL DISPOSITION CREMATION AND PROCESS AUTHORIZATION

(PLEASE TYPE OR PRINT)

CREMATION #:	
CREMATION DATE:	

NAME OF DECEASED	DATE OF BIRTH
CAUSE OF DEATH	DATE OF DEATH
<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">DISPOSITION OF CREMATION</div> <input type="checkbox"/> DELIVERED TO: <input type="checkbox"/> 1. FUNERAL HOME <input type="checkbox"/> REGISTERED MAIL: <input type="checkbox"/> 2. AUTHORIZED AGENT	COUNTY OF DEATH: _____

NAME OF FUNERAL HOME _____

ADDRESS OF FUNERAL HOME _____

ALL PACEMAKERS MUST BE REMOVED

NOTICE: *SEE PACEMAKERS AND RADIOACTIVE DEVICES REQUIREMENTS UNDER POLICIES ON THE REVERSE SIDE OF THIS AUTHORIZATION. All such devices must be removed before cremation at Ascension Reflection Cremation Services, Inc. If not removed, the Funeral Home and authorized representative(s) shall be held responsible for any damage and/or injury resulting. The crematorium will not be responsible or accept any liability under those circumstances.

PACEMAKER:	<input type="checkbox"/> NO <input type="checkbox"/> YES
RADIOACTIVE DEVICES:	<input type="checkbox"/> NO <input type="checkbox"/> YES, TYPE: _____ LOCATION: _____

JEWELRY:	<input type="checkbox"/> NO <input type="checkbox"/> YES	<input type="checkbox"/> REMOVED BY FUNERAL DIRECTOR	<input type="checkbox"/> CREMATED WITH BODY
CASKET TYPE:	<input type="checkbox"/> K-FLARE <input type="checkbox"/> WOOD	<input type="checkbox"/> CARDBOARD	<input type="checkbox"/> OTHER: _____

Family Witness: NO YES (If yes, please call for scheduling)

I (WE) HAVE IDENTIFIED THE HUMAN REMAINS AS THE DECEDENT NAMED ABOVE. I (WE) HAVE AUTHORIZED THE FUNERAL HOME TO DELIVER THE DECEDENT TO ASCENSION REFLECTION CREMATION SERVICES, INC. FOR CREMATION. I (we) hereby certify that I (we) have full authority to arrange for the Cremation and Processing

of the above named decedent. I (we) hereby agree to indemnify, defend and hold harmless ASCENSION REFLECTION CREMATION SERVICES, INC., its officers, agents and employees of and from any and all claims, demands, causes of action and suits of every kind, nature and description, in law or equity, including all legal fees, costs and expenses of litigation, arising as a licensed Funeral Director has fully explained the CREMATION PROCESS, POLICIES/PROCEDURES AND REQUIREMENTS OF ASCENSION REFLECTION CREMATION SERVICES, INC. I (We) the undersigned have read both the front and back side of this Authorization and understand the provisions contained on this legal document. By signature I (we) fully understand the cremation and process authorization. I (we) therefore authorize ASCENSION REFLECTION CREMATION SERVICES, INC. to proceed with the cremation and processing.

SIGNATURE OF AUTHORIZED REPRESENTATIVE(S) FOR CREMATION:

NAME (please print)	RELATIONSHIP TO DECEASED	NAME (please print)	RELATIONSHIP TO DECEASED
SIGNATURE		SIGNATURE	
ADDRESS		ADDRESS	
CITY STATE ZIP CODE		CITY STATE ZIP CODE	
NAME (please print)	RELATIONSHIP TO DECEASED	NAME (please print)	RELATIONSHIP TO DECEASED
SIGNATURE		SIGNATURE	
ADDRESS		ADDRESS	
CITY STATE ZIP CODE		CITY STATE ZIP CODE	

I warrant by witness and execution of this legal document that the following Authorities and Certifications are just and true to the best of my knowledge. I have fully explained to the authorizing agents(s) the cremation process, policies, procedures and requirements of ASCENSION REFLECTION CREMATION SERVICES, INC.

FUNERAL HOME DIRECTOR/REPRESENTATIVE NAME (please print)	SIGNATURE	DATE
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SPECIAL INSTRUCTIONS OR HAZARDOUS WARNINGS:

ASCENSION REFLECTION CREMATION SERVICES, INC. -- OFFICE USE ONLY			FOR REGISTERED MAIL:		
RECEIVED REMAINS:	DATE:	TIME:	NAME:		
CREMATION COMPLETED:	DATE:	TIME:	ADDRESS:		
DISPOSITION OF CREMAINS:	DATE:	TIME:	TRACKING #:		

ASCENSION REFLECTION CREMATION SERVICES, INC. POLICIES, PROCEDURES AND REQUIREMENTS

The cremation, processing, and disposition of the remains of the deceased shall be performed in accordance with all governing laws. This contract details the policies, procedures and requirements of Ascension Reflection Cremation Services, Inc. and the designated Funeral Home.

This is a legal document that describes the policies/procedures and requirements of Ascension Reflection Cremation Services Inc. and serves as the **Final Disposition Cremation and Process Authorization Form**. Ascension Reflection Cremation Services, Inc. also known as ARC Service.

ASCENSION REFLECTION CREMATION SERVICES, INC. REQUIREMENTS FOR CREMATION

Cremation will take place only after all the following conditions have been met.

1. Civil and medical authorities have issued all required permits.
2. All necessary authorization(s) has been obtained by the Funeral Director(s) and no objections have been raised.
 - Ascension Reflection Cremation Services, Inc. normally does NOT have contact with the general public and works exclusively for funeral directors. Ascension Reflection Cremation Services, Inc. must rely solely on the licensed funeral director(s) to identify the deceased, to collect and to provide legal authorization(s) for the cremation and processing to take place. Funeral directors hold harmless Ascension Reflection Cremation Services, Inc. for all matters of identification and authorization.
 - It is understood that the Act of a Funeral Director(s) sending a decedent to ARC Service constitutes a fully executed contract.

CASKETS/CONTAINERS

Ascension Reflection Cremation Services, Inc. requires either a combustible casket or an alternative (cremation) container for all cremations. All caskets and alternative containers must meet the following standards: 1) Composed of materials suitable for cremation; 2) Able to be closed to provide a complete covering of the human remains; 3) Resistant to leakage or spillage; 4) Sufficient for handling with ease; 5) Provide protection for the health and safety of crematory personnel.

If the casket or alternative container does NOT meet the criteria due to weight or condition of the deceased and or container, Ascension Reflection Cremation Services, Inc. at its sole discretion shall supply: reinforced tray, protective liner or any items needed to safely transport or load the deceased into the cremation chamber. Any such material shall become an added charge to the funeral director, that will result in added charge(s) to the Authorizing Agent or family of the deceased. ARC Service does this out of respect for the deceased to preserve their dignity, as well as to protect all personnel.

Many caskets that are comprised primarily of combustible material, and may contain some exterior parts (e.g., decorative handles or rails) that are not combustible and cause damage to the cremation equipment. ARC Service at its sole discretion, reserves the right to remove these non-combustible materials prior to cremation and to discard them with similar materials from other cremations and other refuses in a non-recoverable manner.

FAMILY WITNESS

Family Witness constitutes of; A time up to a 10-minute period, where 1 to 6 members of the immediate family (over the age of 18 years old), arrive **ON TIME** at Ascension Reflection Cremation Services, Inc. 37105 Industrial Rd, Livonia, MI 48150 to witness the interment of the decedent into the cremation chamber from the viewing window. Family witness has been Requested or Declined on signature page. This **specified** time has been pre-arranged by the Funeral Home. **The Family Witness Release & Hold Harmless form will be signed at ARC Service, by all in attendance.** Any Family Witness must be approved by the funeral director. ARC Service is NOT a funeral home. Any actions or services other than the above-described Family Witness, including but not limited to, Religious Services, attendance greater than 6 individuals, use of our Reflection Room, viewing of the deceased, family ID, etc. must be arranged and approved by the funeral director. Such actions that become "Services" will result in charges that are determined on a case-by-case basis by Ascension Reflection Cremation Services, Inc., and the licensed funeral director(s).

PACEMAKERS AND RADIOACTIVE DEVICES

NOTICE* Pacemakers, lithium powered devices, radioactive drugs, mechanical devices and/or implants (such as but not limited to **BRACHYTHERAPY**) may create a hazardous condition when placed in the cremation chamber and subjected to high heat. It is imperative that pacemakers and radioactive devices be removed prior to cremation. See ***NOTICE** on Authorization signature side (front of this form).

THE CREMATION PROCESS

All cremations are performed individually. Ascension Reflection Cremation Services Inc.'s certified cremation operator will place the human remains of only one individual in the cremation chamber at a time, along with the individual's recorded identification numbered tag.

Cremation is performed by placing the deceased (in a casket or other container) into a cremation chamber, where they are subjected to intense heat and flame. During the cremation process, the certified cremation operator will use acquired skills to facilitate a complete cremation. Through the use of a suitable fuel, incineration of the container and contents is accomplished, and all substances are consumed or driven off, except bone fragments (calcium compounds) and metal (including other non-organic materials) as the temperature is not sufficient to consume those.

Following a cooling period, the cremated remains, (which will normally weigh several pounds in the case of an average size adult), are swept or raked from the cremation chamber. ARC Service makes a proficient effort to remove all the cremated remains from the cremation chamber, but it is impossible to remove all of them, as some dust or other residue from the process are always left behind. In addition, while every 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.

When the cremated remains are removed from the cremation chamber, the skeletal remains often contain recognizable bone fragments. After the bone fragments have been separated, from the other non-organic materials. Those bone fragment(s) will be mechanically processed (pulverized). Any non-combustible materials (insofar as possible), such as bridgework, prosthesis, casket materials, etc. will be separated and removed from the human bone fragments by visible or magnetic selection and will be disposed of by ARC Service in a non-recoverable manner.

After processing, the inurnment of the cremated remains will be 1 plastic Temporary Urn (unless the volume of cremated remains requires more than 1 temporary Urn, then the Urn will be numbered 1 of 2 and 2 of 2.). This Temporary Urn is labeled with: the Name of the Decedent, Name & Address of the Funeral Home, and the date of cremation. Delivery of the Cremated Remains is Authorized on Signature Front page.

NOTE* CREMATION IS IRREVERSIBLE AND FINAL. READ CAREFULLY BEFORE SIGNING.**

Due to the nature of the cremation process any personal possessions or valuable materials (such as: but not limited to prosthesis, recovered surgical implants, dental material, or anything found with the cremated remains of this named decedent that was not organic. Those material(s) not removed are destroyed during processing and any remnants will become the sole property of ARC Service. Those non-organic materials will be recycled whenever possible, otherwise disposed of in a non-recoverable manner. Ascension Reflection Cremation Services, Inc. is not responsible or liable for returning any material(s)/remnants. The casket or container will not normally be opened by Ascension Reflection Cremation Services Inc., Arrangements must be made with the funeral home to remove such valuable possessions (ex. Dental gold or jewelry etc.) prior to the time that the decedent is transported to the Crematorium.

Authorized Representative(s)

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