

FLORIDA FUNERAL HOME & CREMATORY

1495 NORTH WEST 17TH AVENUE

MIAMI, FLORIDA 33125

(305) 325 1171 FAX (305) 325 8616

Name of Deceased

Date of Death

Place of Death

AUTHORIZATION FOR REMOVAL AND DISPOSITION WITHOUT EMBALMING

The undersigned hereby direct and authorize FLORIDA FUNERAL HOME & CREMATORY and/or its agents, to remove and take possession of the body of the above named deceased from the above named institution and to provide for the final disposition. I/We represent that I/We are the nearest degree of relationship to the deceased. I/We direct that there be NO EMBALMING, but authorize refrigeration in compliance with Division of Health Rules- General Authority Sec. 381.031 (g) F.D. & E. Rules. The undersigned also wished to hereby indicate the desire (not to have) (to have) rites/ceremonies with the casketed body present. The undersigned do further state that I/We (have) (have not) identified the body of the above named deceased and assume all responsibility and/or liability of anyone whomever for mistaken identity. In any such event the undersigned hereby agree to indemnify and hold harmless FLORIDA FUNERAL HOME & CREMATORY, its officers, agents, and employees from any claims or cause of action including a reasonable attorney fee to the defense thereof arising out of their act of identification or failure to identify, or arising out of the decision not to embalm, or arising out of any other decision indicated by this agreement which may result in mental or physical distress harm or financial loss to themselves or to others.

Signature

Relationship to Deceased

Date Signed

Verbal Authorization Given To:

Date:

In Person

By Phone at

AUTHORIZATION FOR REMOVAL WITH EMBALMING

The undersigned hereby direct and authorize FLORIDA FUNERAL HOME & CREMATORY and/or its agents, to remove and take possession of the body of the above named deceased from the above named institution and to provide for the final disposition. I/We direct that the body be EMBALMED and otherwise prepare for final disposition. I/We represent that I/We are the nearest degree of relationship to the deceased. The undersigned do further state that I/We (have) (have not) identified the body of the above named deceased and assume all responsibility and/or liability of anyone whomever for mistaken identity. In any such event the undersigned hereby agree to indemnify and hold harmless FLORIDA FUNERAL HOME & CREMATORY, its officers, agents, and employees from any claims or cause of action including a reasonable attorney fee to the defense thereof arising out of their act of identification or failure to identify, or arising out of any other decision indicated by this agreement which may result in mental or physical distress or financial loss to themselves or others.

Signature

Relationship to Deceased

Date Signed

Witness: _____

Verbal Authorization Given To:

Date:

In Person

By Phone at

DISCLOSURE/DISCLAIMER

The Federal Trade Commission trade regulation rule for funeral industry practices requires certain disclosures and prohibits misrepresentations. The disclosure/disclaimer form is a check list we ask those who serve to read and sign

I/We who made the arrangements for the funeral and final disposition of the above named deceased do hereby attest to the following:

1. Prior to discussing prices, service or merchandise. I/We were given/shown a General Price List effective on 10/08/2003.
2. Prior to discussing or selecting a casket- I/We were shown a casket price list effective on 10/08/2003
3. Prior to discussing or selecting outer burial containers, I/We were shown an outer burial container price list effective on 10/08/2003
4. I/we were told that embalming is not required by law except in certain special cases. If embalming was provided, this was done by my/our permission. Or, if some legal requirement mandated embalming this was fully explained to me/us and that reason is noted on the statement of goods and services/purchase agreement.
5. I/We were not told that any law requires a funeral using a sealed casket except in very special circumstances. If such circumstances exist in this particular case, the reason has been thoroughly explained to me/us and is agreed by me/us.
6. I/We were not told that any law requires a casket other than an unfinished wood box or alternative container for direct cremation or direct disposition.
7. I/We were not told that no state law requires purchase of an outer burial container or any other funeral goods or services selected except as set forth on the statement of funeral goods and services selected.
8. No claims were made that embalming or the use of any merchandise available from this funeral firm would delay the decomposition of the remains for a long term or indefinite time, or would protect the body from graveside substance. No representations or warranties were made to me/us about the protective features of caskets or outer burial containers other than those made by the manufacturer. The only warranties expressed or implied, granted in connection with goods sold with the funeral service we arranged were the expressed written warranties, if any, extended by the manufacturer thereof. No other warranties and no warranties of merchandising fitness for a particular purpose were expended to us.
9. I/We were not told the amount of each of the cash advance items was the cost to the funeral firm. I/We were not told the cost may be different based on volume or cash discounts or other professional/trade customs.

Person's making final arrangements. I/WE UNDERSTAND FULL PAYMENT IS REQUIRED BEFORE SERVICE TIME

Signature

Relationship to Deceased

Date Signed