

Lone Star Cremation

AUTHORIZATION FOR CREMATION

Kiser Undertakings LLC
1804 Owen Court, Suite 112, Mansfield, TX 76063

(817) 546-0108
TFSC License #4372

**THIS IS A LEGAL DOCUMENT. IT CONTAINS IMPORTANT PROVISIONS CONCERNING CREMATION.
CREMATION IS IRREVERSIBLE AND FINAL. READ THIS DOCUMENT CAREFULLY BEFORE SIGNING.**

You may type into this form on a computer, or print it and complete it by hand. Either way it must be signed in ink. Email a photo or scan of every page to [EMAIL ADDRESS], or bring it to our office at 1804 Owen Court, Suite 112, Mansfield, TX 76063. We cannot proceed with the cremation until we have your signed authorization. Questions? Call (817) 546-0108 — Monday to Thursday 9:00 am to 5:00 pm, Friday 9:00 am to 3:00 pm.

This form authorizes the cremation only. The funeral arrangements and their cost were made by the purchaser named on the order, who receives a separate itemized Statement of Funeral Goods and Services Selected. Signing here does not make you responsible for payment.

CREMATION AND DISPOSITION OF THE REMAINS OF

NAME OF DECEASED

DATE OF DEATH (completed by
Lone Star)

TIME OF DEATH (completed by
Lone Star)

AUTHORIZING AGENT

I, (FULL LEGAL NAME OF AUTHORIZING AGENT)

RELATIONSHIP TO DECEASED

- ☐ Confirm and declare that I possess the complete legal authority to authorize the cremation of the above-named deceased and that I am not aware of any person with a superior or equal priority right.
- ☐ Confirm there are other person(s) that have an equal priority right to authorize the cremation and all reasonable efforts to contact that person(s) have failed. Furthermore, I believe that said person(s) would not object to the cremation and agree to indemnify and hold harmless the funeral establishment and the crematory establishment for any liability arising from performing the cremation without the person's authorization.

VIEWING OF THE DECEASED PRIOR TO CREMATION (SELECT ONE)

- ☐ No Viewing
- ☐ Yes, I want to view (Additional charges will apply)

IF YES — DATE OF VIEWING OR SERVICE

TIME OF VIEWING OR SERVICE

ITEMS OF VALUE DELIVERED TO THE CREMATORY WITH THE DECEASED

LIST ANY ITEMS AND THEIR DISPOSITION (ENTER "NONE" IF NOT APPLICABLE)

PERMANENT DISPOSITION OF THE CREMATED REMAINS

MANNER OF PERMANENT DISPOSITION, IF KNOWN

IF REMAINS ARE TO BE SHIPPED, SHIPPING ADDRESS

AUTHORIZATION AND TERMS

I hereby request and authorize **KISER UNDERTAKINGS L.L.C dba LONE STAR CREMATION** to take possession of and plan for the cremation of the human remains of the deceased and receive the cremated remains from the crematory. **I authorize the crematory establishment to cremate the human remains of the deceased.** The authorizing agent assumes responsibility for the disposition of the cremated remains. We will release the cremated remains to the authorizing agent or his designated agent or ship the cremated remains to the authorizing agent or dispose of the cremated remains not earlier than the 12th day following the date of cremation if the cremated remains have not been claimed by the authorizing agent.

The cremation processing and disposition of the remains of the deceased authorized herein shall be performed in accordance with all governing laws, the rules, regulations and policies of the crematory and funeral home, and the following terms and conditions.

PACEMAKER AND IMPLANTED DEVICE DECLARATION

To my knowledge the deceased remains contain a pacemaker or any other material or implant that may potentially be hazardous or cause damage to the cremation chamber or to the person performing the cremation. I authorize the removal of any such device prior to cremation.

IF A DEVICE IS PRESENT, DESCRIBE IT

CREMATION PROCESS

It is the policy of the crematory to require that the remains of the deceased be placed in some type of minimum container. If the deceased is not in a container when it reaches the crematory then the minimum container will be furnished and charged to the funeral home. When a casket is used, the crematory is authorized to remove and dispose of handles, ornaments and any other non-combustible items attached to the cremation container prior to cremation. In the event the remains of the deceased are received by the crematory in a casket or container made of non-combustible material, I authorize the remains of the deceased to be removed prior to cremation and placed in a combustible container. We further authorize the crematory to dispose of any non-combustible casket in any lawful manner it deems appropriate.

The cremation container containing the deceased will be placed in the cremation chamber and will be totally and irreversibly destroyed by prolonged exposure to intense heat and direct flame. I authorize the crematory to open the cremation chamber during the cremation process and reposition the remains of the deceased to facilitate a complete and thorough cremation.

Certain items, including, but not limited to body prosthesis, dentures, dental bridgework, dental fillings, jewelry, and any other personal articles accompanying the remains of the deceased may be destroyed during the cremation process. I further authorize that if any items, other than the cremated remains of the deceased, are recovered from the cremation chamber, they may be separated from the cremated remains of the deceased and disposed of by the crematory. I hereby authorize the crematory to separate and remove from the cremation chamber all non-combustible materials, including, but not limited to, hinges, latches, nails, jewelry and precious metal and to dispose of such materials.

Following cremation, the cremated remains of the deceased, consisting primarily of bone fragments, will be mechanically pulverized to an unidentifiable consistency prior to placement in an urn or other container. Unless an urn or container suitable for shipment is provided, the crematory will place the cremated remains of the deceased in a container made of plastic and covered with cardboard, which is destructible and will not be held liable for any damages that might occur during shipment. In the event the container or provided urn is insufficient to accommodate all the cremated remains of the deceased, any excess cremated remains will be placed in a secondary container and returned to the funeral home, together with the primary container or urn.

I understand and acknowledge, that even with the exercise of reasonable care and the use of the crematory's best efforts, it is not possible to recover all particles of the cremated remains of the deceased and that some particles may inadvertently become commingled with particles of other cremated remains remaining in the cremation chamber and/or devices utilized to process the cremated remains. I hereby authorize the crematory to dispose of any such residual particles in any lawful manner it deems appropriate.

INDEMNIFICATION

I agree to indemnify, release and hold the crematory, funeral home, their affiliates, agents, employees and assigns, harmless from any and all loss, damages, liability or causes of action (including attorney's fees and expenses of litigation) in connection with the cremation and disposition of the cremated remains of the deceased, as authorized herein, or my failure to correctly identify the remains of the deceased, disclose the presence of any implanted mechanical or radioactive devices, or take possession of, or make permanent arrangements for, the disposition of such remains.

I warrant that all representations and statements made herein are true and correct and that I have read and understand the provisions contained in this document.

SIGNATURE OF AUTHORIZING AGENT

Sign here in ink

PRINT YOUR NAME

SIGNED ON BEHALF OF KISER UNDERTAKINGS

Roy H. Kiser, Jr.

Roy H. Kiser, Jr. · Funeral Director License #11032

DATE SIGNED