DECLARATION FOR DISPOSITION OF CREMATED REMAINS

I/We hereby declare (my remains) or (the remains of)in
the possession of	Name of Person arrangements are for, will be cremated by
the possession of	Number , will be cremated by
Name of Crematory and Telephone Number	nd shall be disposed of in the following
manner (Note 1): Manner, Location and Or	her Details of Disposition
	Attach additional pages if necessary
Name of person(s) with the legal right to control disp	osition (Note 2):
Signed	Date
	Date
Signed Person(s) with legal right to control disposition	
Signed Person(s) with legal right to control disposition	Date
Signed Person(s) with legal right to control disposition	Date
Name of person(s) contracting for cremation services	
Name of person(s) contracting for cremation services	
Signed Person(s) contracting for cremation services	Date
Person(s) contracting for cremation services	
Signed Lic. #	
Note 1: See Health & Safety Code Sections 7054, 7054.6, 7116, 7117 for	
Note 2: See Health & Safety Code Section 7100 for the list of person(s) w	
IMPORTANT: Business and Professions Code § 7685.2(b) requires F by the Cemetery and Funeral Bureau, when making arrangements for	
disciplinary action by the Bureau. This declaration does not replace t	
and Safety Code Sections 7110 and 7111.	

NOTICE REGARDING CREMATED REMAINS

A person having the right to control disposition of cremated remains may remove the remains in a durable container from the place of cremation or interment, pursuant to Section 7054.6 of the Health and Safety Code.

If the cremated remains container cannot accommodate all cremated remains of the deceased, the crematory shall provide a larger cremated remains container at no additional cost, or place the excess in a second container that cannot easily come apart from the first, pursuant to Section 8345 of the Health and Safety Code