

Alkaline Hydrolysis and Disposition Authorization

Notice: This is a legal document that contains important provisions concerning Alkaline Hydrolysis. Please read this entire document carefully before signing. Alkaline Hydrolysis is an irreversible and final process.

NAME OF DECEDENT: _____

SEX: _____

DATE OF BIRTH: _____

DATE OF DEATH: _____

SSN: _____

I the undersigned (the "Authorizing agent") hereby authorize and request First Hydrolysis Services(the "Facility"), its agents and employees, to use Alkaline Hydrolysis and process the human remains of the Decedent.

Schedule & Container Requirement: The Facility may perform the Alkaline Hydrolysis upon receipt of the remains, at its discretion, and according to its time schedule, as work permits, without obtaining any further authorization or instructions from me/us. The Facility is not required that the Human Remains be placed in a container for Alkaline Hydrolysis but me/us have the option to choose one. The Facility is authorized to dispose of any dangerous materials, handles or other items that could be harmful to the process.

Type of container: [] None [] Other: _____

Type of container requested for the remains: [] Plastic Temporary Urn [] Other: _____

AUTHORIZATION

I hereby state that I am the closest living next of kin of the Decedent or are otherwise empowered and authorized to execute this authorization according to all state and local laws.

I am aware of no objection to Alkaline Hydrolysis by the spouse, any child, parent or sibling of the Decedent, or of provision of any contract or instructions made by the Decedent.

I have either identified or waived my rights of identification of the human remains that I/we released to First Hydrolysis Services, as the Decedent. All personal property, clothing and or valuables have been removed from the human remains prior to Alkaline Hydrolysis or I hereby order them destroyed or recycled. I understand that any personal property, clothing or valuables, including all metals, on or with the body will be destroyed or recycled during or after process, and therefore will not be returned.

I hereby agree to indemnify and hold harmless, First Hydrolysis Services, First Call Plus of Washington, L.L.C., its officers, directors, agent and employees, from any claim, liability, cost or expense resulting from their reliance on or performance consistent with the direction, declaration, representation, authorizations and agreements herein, including but not limited to, claims brought by any other persons claiming the right to control the disposition of the decedent or the decedent's remains.

By execution, including initials at appropriate spaces the undersigned warrant(s) that all representations and statements contained herein are true and correct. These statements are being relied on by the Facility and the undersigned has read and understood the provisions of this document.

DISPOSITION OF REMAINS

[] (Initial) Remains are to be sent to: _____

Address: _____

[] (Initial) Remains will be called for by: _____

*** Funeral Home and Facility are not responsible for any loss or damage of remains shipped via Priority Express Mail with the U.S. Postal Service**

IMPORTANT: ALL NEAREST NEXT OF KIN MUST SIGN

SIGN HERE →

Signature: _____ Telephone Nbr: _____

Print Name: _____ Relationship: _____

Address: _____

→

WITNESS: _____ **Date:** _____

Print Name: _____ Relationship: _____

Id #

Authorization and Disposition - Addendum

In re the matter of:

I/we understand that the remains must be claimed, or the disposition arranged within 30 days of the date of alkaline hydrolysis.

Additional Next of Kin (Authorized Agents)

Print Name: Relationship to Decedent:

Signature: Telephone Nbr:

Address:

Print Name: Relationship to Decedent:

Signature: Telephone Nbr:

Address:

Print Name: Relationship to Decedent:

Signature: Telephone Nbr:

Address:

Print Name: Relationship to Decedent:

Signature: Telephone Nbr:

Address:

WITNESS: DATE:

Print Name: Relationship: