



4912 E. Ashlan Avenue, Suite 102
Fresno, CA 93726
FD 2174
Office: 559-500-7605
Fax: 559-292-2308
Email: info@yosemitecremation.com
www.yosemitecremation.com

Authorization to Release Human Remains

I, NAME OF NEXT-OF-KIN (PRINT): _____ RELATIONSHIP: _____

ADDRESS: _____, CITY: _____, STATE: _____, ZIP CODE: _____

authorize the release of the remains of: _____ to YOSEMITE CREMATION.
(Decedent)

HEALTH AND SAFTY CODE - CHAPTER 3 - CUSTODY AND DUTY OF INTERMENT

7100. The right to control the disposition of the remains of a deceased person, unless other directions have been given by the decedent, vest in, and the duty of interment and liability for the reasonable cost of interment of the remains devolves up the following; (1) An agent under a power of attorney for health care who has the right and duty of disposition under Division 4.7 (commencing with Section 4600) of the Probate Code, except that the agent is liable for the costs of disposition only in either of the following cases (a) The surviving spouse. (b) The surviving adult child or majority of adult children. (c) The surviving parent or parents of the decedent. (d) The surviving person or persons respectively in the next degrees of kindred in the order named by the laws of California as entitled to succeed to the estate to the estate of the decedent.

WARNING: The person signing this "Order for Release" is liable for all damages caused by any untruthful statement contained in this document. (CA Health & Safety Code 7110).

I certify that I am the person having the right to control the disposition of the remains of the above-named decedent, pursuant to CA Health and Safety Code §7100.

SIGNED: _____ DATE SIGNED: _____