

Sam Isaacs & Son Ltd

Crematorium: Shooters Hill, St. Andrew / Office: 44 Hanover Street, Kingston, Jamaica
Tel. 922-2896; 922-6768; Fax: 967-4430

APPLICATION FOR CREMATION WITH STATUTORY DECLARATION

(CREMATION IS IRREVERSIBLE AND FINAL. PLEASE READ THIS DOCUMENT CAREFULLY BEFORE SIGNING.)

Name of Applicant.....
Address.....
Tel. No..... Cell No.....
Occupation.....

To the Authorized Officer in the Parish of.....
To undertake the Cremation of the remains of.....
Address.....
Occupation..... Age..... Sex..... Marital Status.....

Crematorium established and operated by:
Sam Isaacs & Son Ltd.

The true answers to the questions set out below are as follows:

1. Are you the nearest relative?.....
If not, state (a) Your relation to the deceased.....
(b) Why the application is made by you and not a closer relative
2. Did the deceased leave any written instructions as to the mode of disposal of his/her remains?
.....
If so, what?
3. Has any close relative of the deceased expressed any objection to the proposed cremation?
4. What was the date/hour of death?.....
5. Where did the deceased die?.....
6. Do you know or have any reason to suspect that the death of the deceased was due, directly or indirectly to violence, poison, privation or neglect?.....
7. Do you know any reason whatsoever to suppose that an examination of the remains of the deceased may be desirable?.....
8. Give name(s) and address of the medical practitioner(s) who attended to the deceased during his/her illness
.....
.....

I, do solemnly declare as follows:- That all the particulars stated above are true, and that to the best of my knowledge and belief no material particular has been omitted. I make this solemn declaration conscientiously believing the same to be true and by virtue of the Voluntary Declaration Law, and I am aware that if there is any statement in this declaration which is false in fact, which I know or believe to be false (or) do not believe to be true, I am liable to fine or imprisonment.

Please read conditions overleaf carefully before signing.

(Signature of Applicant).....

Declared at.....

The day of 20..... before me:

(Signature).....

JUSTICE OF THE PEACE

CONDITIONS

The cremation, processing and disposal of the remains of the Deceased authorized herein, shall be performed in accordance with all governing Laws, rules, regulations, and policies of the Crematorium under the following terms and conditions:-

I understand that certain materials will either be destroyed (or) may not be recoverable following the cremation process. These materials include: dental bridgework, dental fillings, personal effects, and body prostheses. Mechanical or radioactive devices such as pacemakers may create a hazard when placed in the Cremation Chamber. The Crematorium will not cremate any human remains which contain any type of implanted mechanical or radioactive device. In the event the remains of the deceased contain such a device, I hereby authorize the Crematorium, its Agent and Employees, to remove any such mechanical device from the remains of the deceased prior to cremation, and dispose of such items at its discretion.

I understand that if after a period of One Hundred and Twenty (120) Days from the time of cremation, the Crematorium is authorized and directed to dispose of the *unclaimed cremated remains* of the deceased in any manner deemed appropriate, by scattering the remains at sea or placing them in a cemetery scatter garden or pond.

I also understand that due to the nature of the cremation process not all of the cremated remains of the deceased are capable of being recovered, even with the best technology and efforts. I authorize the disposal of these particles of cremated remains to the sole discretion of the Crematorium.

Having read the above conditions and signed *Page One* of this document, I hereby agree to the Laws, Rules, Regulations and Policies of the Crematorium.