724-287-3707
Glenn Thompson Miller, Owner

All Cremations are Individual and Private

For Office Use Only

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Cremation Authorization & Release of Pet Remains

Name of Pet:	Type of Pet: ☐ Canine ☐ Feline ☐ Other	
☐ Male ☐ Female	Breed:	
Weight: lbs.	Birth date:	Date of Death:
Location of Remains: ☐ Home Transfer ☐ Veterinary Clinic/Hospital _____ ☐ Delivered by Family ☐ Other (Specify)		
Name of Owner:		
Address of Owner:		
City: State:	Zip:	Phone #:

1. Cremation Authorization: The Owner hereby authorizes the crematory to arrange the cremation of the remains of the Pet using the services of the Crematory. In providing this authorization, the undersigned represents that he or she is the Owner or the legal representative of the Owner and has the full right and authority to arrange the cremation and the disposition of the cremated remains. Veterinarian is hereby given authorization to release the remains of said pet to Butler Pet Cremation Services for final disposition.
2. Cremation Process: The undersigned acknowledges that due to the nature of the cremation process, any material on the remains of the Pet, such as collars, tags, etc., will be destroyed if not removed. Accordingly, the undersigned has removed any such material or, if the material is present on the Pet's remains, the undersigned understands it will either be destroyed or removed and disposed of by the Crematory.
3. Disposition of Cremated Remains: The undersigned directs the Crematory to take the following actions with regard to the cremated remains of the Pet:
   ☐ Hold the cremated remains until they are picked up by the Owner. If not picked up within thirty (30) days of the date of death, Crematory may dispose of the cremated remains in any lawful manner.
   ☐ Deliver the cremated remains by certified mail to:
   _____(Charges apply)
   ☐ Other: _____
4. Certification: The undersigned certifies the accuracy of all information on this Authorization and will indemnify and hold harmless Butler Pet Cremation Services, their owners, employer and agents, from any liability, cost, expenses or claims resulting from this Authorization and release thereon. In the event, Butler Pet Cremation must initiate collection proceedings, the owner/signor will be responsible for all legal expenses.
5. Has this pet bitten any person within the past 10 days? ☐ Yes ☐ No

Date: _____ **X**_____
(signature of Pet Owner)

Receipt of Cremated Remains:

The recipient hereby acknowledges receipt of the cremated remains on _____(date) at _____(place). Recipient further acknowledges receipt of the cremated remains are contained to the temporary container or other container _____(description).

_____ _____
Signature of Recipient Witness