



Affidavit of Heirs for Cremation

STATE OF Arizona §
COUNTY OF Maricopa §

I/ We hereby certify and attest that I/We knew _____(the “Decedent”) for _____ (“length of time”) and am/are the _____ (“relationship to the decedent”) of Decedent. It is my/our understanding and belief that the decedent desired his/her remains to be cremated. To the best of my/our knowledge, Decedent has _____surviving relatives, next-of-kin or legal heirs to direct the final disposition of Decedent’s remains. I/We have no reason to believe that there will be any objection to the cremation of Decedent.

I/We hereby authorize Simply Cremation & Funeral Arrangements to prepare and make arrangements for the cremation of the remains of Decedent at Lifeplan Crematory . I/We have executed the attached Cremation Authorization and the cremation will be carried out in accordance with the terms and conditions of such Authorization. I/We further agree to indemnify and hold harmless the Funeral Home, Crematory, and their affiliates, officers, directors, employees, representatives, agents, and assigns from any and all liabilities, claims or causes of action arising out of, or in any way connected with, my representation, authorization and instructions to cremate the remains of Decedent.

X

Printed Name	Relationship	Signature	Date
Address	City	State	Phone Number

X

Printed Name	Relationship	Signature	Date
Address	City	State	Phone Number

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BEFORE ME, THE UNDERSIGNED, A Notary Public, on this day personally appeared _____, known to me to be the person(s) whose name(s) is subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this ____ day of _____, 20_____.

Notary Public and Legible Stamp