

## AZ Discount Cremation Instructions for Completing Paperwork

This online package is designed for those families seeking a non-ceremonial cremation most commonly known as direct cremation. This package does not include any type of memorial service, life celebration ceremony, death certificates, or placing obituary/death notices in newspapers. This package includes a death notice on our website. For many this is an economical and affordable way to honor their loved one. After the cremation services, the cremated remains are placed in a plastic container and given to the family. Please carefully read the instructions for completing each form.

### Completing the Death Registration Worksheet

*This form will be used to complete the death registration with the Maricopa County Office of Vital Registration and the State of Arizona Bureau of Vital Records. Once registered, certified copies of the death certificate will be available for purchase.*

First Page: Fill in number 1A through 18D, leave number 9 blank

Second Page: Fill in number 18E through 19A, leave number 19B blank. The funeral home will complete number 20A through number 23. Fill in number 24A through 28B.

Third Page: Fill in number 28C through 28D., leave 29A through 31 blank.

### Completing the Affidavit of Heirs for Cremation Form

*The purpose of this form is to provide the funeral home with the names of the surviving relatives authorized to direct final disposition of the decedent's remains.*

Fill in where indicated the deceased name, length of time known, your relationship to the deceased and the number of surviving relatives. ***See Cremation Policy below.*** Print your name, Sign (Notarize) and date this form.

### Our Cremation Policy

***No cremation may take place without written authorization from the nearest of kin of the Deceased, or the Deceased's legal representative.***

The nearest next of kin is the person or persons described below in the following order:

- a) Surviving Spouse
- b) All Surviving Children
- c) All Surviving Parents
- d) All Surviving Brothers and Sisters
- e) All Surviving Uncles and Aunts
- f) All Surviving First Cousins, etc.

If the nearest next of kin is the Deceased's Legal Representative, he/she can sign provided there are legal documents referencing cremation. The funeral home shall review and retain a copy of the document.

## Completing the Authorization for Cremation and Disposition form

*The purpose of this form is to authorize the cremation, processing, and disposition of the deceased and the cremated remains.*

- ❖ Fill in Decedent's Legal Name, Time and Date of Death (if unknown, leave blank)
- ❖ Check on #4 in the ( ) whether or not any metal in their body to be returned or recycled
- ❖ Check on #5 in the ( ) whether or not he/she has a mechanical device implant (i.e. pacemaker)
- ❖ Write in #6, who is authorized to pick up the cremated remains
- ❖ Initial at the end of #7
- ❖ Sign after #9, **MUST BE NOTARIZED**
- ❖ Initial at the bottom after reading the Cremation Process

## Completing the Release of Remains form

*The purpose of this form is giving the funeral home permission to pick up the deceased at the place of death.*

Fill in where indicated in the first section of the form the next of kin information: name, relationship, address, name of the deceased and location of the deceased. In the second section, fill in the deceased's full name, social security number and date of birth. Sign (Notarize) and date the form and provide your phone number.

## Verification of Identification without Viewing

*The purpose of this form is to provide the funeral home with means to identify the deceased.*

Fill in the deceased name and date of death. Provide a description of methods our care center can use to identify the deceased (e.g., scars, tattoos, etc.). Please provide a most recent photograph. Include any other information that may be useful for identification. Sign, print, date and provide relationship to the deceased.

## Autopsy form

*The purpose of this form is to inform the funeral home that the deceased's next of kin will not be pursuing a pathologist or medical doctor to perform an autopsy of the deceased.*

Fill in the deceased's name where indicated, sign, date and provide relationship to deceased.

## Statement of Funeral Goods and Services

This is a contract with the funeral home providing the services you paid for. Additional fees may be included for the following reasons:

- If the deceased is over 250 lbs.
- If refrigeration is over 7 days, due to delay of the documents mentioned above.
- If the deceased is at the medical examiner.
- If there is shipping/mailing of the urn.

Please sign the contract and return to us along with the aforementioned documents.  
All documents can be sent via email to [email@simplycremationaz.com](mailto:email@simplycremationaz.com), fax to (623)975-9395 or may be dropped off at our office:

Simply Cremation & Funeral Arrangements  
16952 W. Bell Rd Suite 303  
Surprise, AZ 85374

**For your information:**

You will be able to get a copy of a certified death certificate after a couple of weeks  
For information on how to obtain a certified copy of the death certificate, please visit:  
<https://www.maricopa.gov/2770/Vital-Records>

During the death registration process, Social Security will be notified electronically of the death of your loved one. For information about Survivors benefits, please visit:  
<https://www.ssa.gov/survivors/>

If you have any questions, please call our office at (623)975-9393 or you may email us at [email@simplycremationaz.com](mailto:email@simplycremationaz.com).