

CREMATION PERMIT

VS-48 Revised 3/01/15

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
VITAL RECORDS SECTION****IMPORTANT! READ INSTRUCTIONS ON BACK OF FORM. TYPE OR PRINT LEGIBLY.**

Part I: Person to be Cremated	Name	Sex	Date of Birth	
	Resident Address			
Part II: Funeral Director	Town Where Death Occurred	Date of Death	Time of Death ☐ AM ☐ PM	
	Signature (Funeral Director)	Date Signed	Funeral Home-Name	
	COMPLETE FOR PRE-AUTHORIZED CREMATION ONLY			
	☐ Notified designated custodian #1 or #2 named in Part IV. ☐ Unable to notify designated custodians named in Part IV. List name of other person notified in accordance with Probate law: _____			
Part III: Custodian of Body	Name of Custodian of Body (Please Print)	Custodian's Tel. # (Include Area Code)	Relationship to Decedent	
	Signature of Custodian	Date Signed		
	Resident Address of Custodian			
Part IV: Pre- Authorized Cremation	☐ I am of sound mind and capacity and authorize the cremation of my remains upon my death.			
	☐ I have been designated as the conservator or agent of the person named in this cremation permit, with the authority to authorize in advance of such person's death, cremation of his or her body upon death, designate a custodian of the person's remains, and to authorized the intended disposition of the cremated remains. I am of sound mind and capacity and authorize the cremation of the conserved person or agent.			
	Signature _____ Date _____			
	We attest that the individual named above is of sound mind and capacity at the time of this authorization.			
	Name of Witness #1 _____			
	Name of Witness #2 _____			
	Address of Witness #1 _____			
	Address of Witness #2 _____			
	Signature of Witness #1 _____ Date _____			
	Signature of Witness #2 _____ Date _____			
I authorize the following individual(s) as custodian of my/conserved person's/ principal's remains. If the named individual(s) cannot be contacted at the time of death, then other persons may be contacted in accordance with Probate Law.				
Name of Designated Custodian #1 _____				
Name of Designated Custodian #2 _____				
Resident Address of Designated Custodian #1 _____				
Resident Address of Designated Custodian #2 _____				
Relationship to Person to be Cremated _____ Custodian #1 Tel. No. _____				
Relationship to Person to be Cremated _____ Custodian #2 Tel. No. _____				
Part V: Intended Disposition of Cremated Remains	Intended Disposition of Cremated Remains:			
	☐ Burial (Specify Location): _____ ☐ Entombment (Specify Location): _____ ☐ Return to Person responsible for accepting cremated remains: Name: _____ Address: _____ Tel. #: _____ ☐ Other (Specify): _____			
Part VI: Registrar of Vital Statistics	A Cremation Certificate having been executed, permission is hereby given to cremate the remains of the deceased named above.	Signature (Registrar of Vital Statistics)	City/Town	Date Signed
Part VII: Certification by the Crematory	This is to certify that the remains of the deceased named above was cremated.	Date Cremated	Time of Cremation ☐ AM ☐ PM	
	Name of Crematory	Signature (Superintendent or person in charge of crematory) _____ Date Signed _____		

CREMATION PERMIT MUST BE RETURNED TO THE REGISTRAR OF VITAL STATISTICS OF THE TOWN WHERE DEATH OCCURRED.

INSTRUCTIONS FOR COMPLETING CREMATION PERMIT

Definitions - For the purposes of cremating the cremation permit the following definitions shall apply:

"Conservator" means conservator of the person as authorized pursuant to subdivision (5) of subsection (a) of section 45a-656 to take reasonable care of the conserved person's personal effects.

"Agent" means a person authorized under the provisions of Connecticut General Statutes section 1-43 to carry out matters related to the personal relationships and affairs of the person to be cremated.

Part I

Completed by the funeral director, or in the case of a pre-authorized cremation, the person to be cremated or such person's conservator or agent.

Part II

Completed and signed by the Funeral Director. The item regarding notification is completed only for pre-authorized cremations.

Part III

Completed and signed by the custodian of the body. The custodian of the body may be a person designated prior to death, or if no person has been designated, a person in accord with § 45a-318. (See below)

Part IV – (Completed for Pre-Authorized cremations only)

Any person, 18 years of age or older, and of sound mind, may authorize in a written document, the cremation of such person's remains. A cremation may also be pre-authorized by a conservator of the person, or agent as defined above. The person, conservator or agent may also designate an individual to have custody and control of the body, and to act as agent to carry out the cremation.

Part V

In the case of a pre-authorized cremation, the person to be cremated, or such person's conservator or agent, may indicate the intended disposition of the cremated remains. If not already completed for a pre-authorized cremation, this section shall be completed by the custodian of the body.

Part VI

Completed and signed by the issuing Registrar of Vital Statistics.

Part VII

Completed and signed by the person in charge of the crematory.

Please Note: To pre-authorize a cremation, Parts I and IV must be completed. Part V may also be completed. Parts II, III, V, (if not already completed), VI, and VII will be completed at the time of death.

Connecticut General Statute Section 45a-318

Connecticut General Statute §45a-318 allows a person, conservator of the person appointed for such person, or an agent authorized to carry out matters related to the personal relationships or affairs of a person, to execute in advance of death, an authorization for the cremation of such person's remains. If a pre-authorized cremation is executed, it must be attested in writing by two witnesses that the person pre-authorizing the cremation is of sound mind and capacity at the time the authorization is executed. Section 45a-318 also allows a person, conservator of the person, or agent to designate a custodian of such person's remains, and to direct the disposition of the cremated remains. The funeral director must make reasonable efforts to contact the designated custodian within 48 hours after death. If there is no designated custodian, or if the designated custodian is unavailable to take charge of the remains of the decedent, other persons, in the priority listed, shall have custody and control of the decedent's remains:

- (1) The deceased person's spouse, unless such spouse abandoned the deceased person prior to the deceased person's death or has been adjudged incapable by a court of competent jurisdiction;
- (2) The deceased person's surviving adult children;
- (3) The deceased person's surviving parents;
- (4) The deceased person's surviving siblings;
- (5) Any adult person in the next degree of kinship in the order named by law to inherit the deceased person's estate, provided such adult person shall be of the third degree of kinship or higher;
- (6) Such adult person as the Probate Court shall determine.