

Requesting Cremation Clearance

1. Navigate to **Cremation Clearance** in the Death Registration Menu.



2. Input the **Authorizing Individual's Information**.

Cremation Clearance

Authorizing Individual Name

Copy From Informant

First Last

Relationship to Decedent Other Specify

Authorizing Individual Address

Street Number	Pre Directional	Street Name or PO Box, Rural Route, etc.	Street Designator	Post Directional	Apt #, Suite #, etc
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Zip Code	City or Town	State	Country		
<input type="text"/>	<input type="text"/>	<input type="text"/>	United States		
Phone Number	<input type="text"/>				

By checking this box, all fields will populate based on the inputted informant information.

3. Select Save in order to send the request to the Medical Examiner.

