

**- PDF Cover Sheet Instructions -**

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From: William G. D'Addio, LDD

**American Heritage Cremation Society  
P.O. Box 3745 Holiday, Florida 34692 USA**

Phone : 727-939-1211

Fax : 1-888-744-4181

Subject: **Authorization to Release and Deliver Cremated Remains to the Sea**

**Read first, then follow the steps below.**

Each individual requires documents.

**Part I.**

1. Clearly Print :

- A. Name of Deceased, Date of Death & Date of Birth
- B. Your Relationship
- C. Your Signature, Dated & Printed Name
- D. Signature of Adult Witness, Dated & Printed Name.

2. Total Receipt, Enter Credit Card information, Names & your signature. You may also pay over the phone by calling 1-727-939-1211.

3. **Fax to 1-866-263-6548 or 1- 888-744-4181**

4. We will confirm receipt of fax. Then, please place original in the mail to our address above. The Cremated remains may then be forwarded to our address once payment has been made:

**American Heritage Cremation Society  
P.O. Box 3745 Holiday, Florida 34692 USA**

Placements generally take place within the following month but by the following season after cremated remains are received. Certificate of placement are returned via pdf file within 45 days of placement.

Respectfully,

*W. G. D'Addio, LDD*

Bill D'Addio

**The Authorization May Not Be Altered**

Administrative Offices:

5438 Flora Avenue    Holiday, Florida 34690    (727) 939-1211    [www.cremation.cc](http://www.cremation.cc)



### Authorization to Release and Deliver Cremated Remains to the Sea

I, the undersigned, certify and represent that I have full legal right, possession and authority, and know of no living person who has a superior priority to authorize the disposition of the remains of:

(A) \_\_\_\_\_ Date of Death: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

I/we hereby request, authorize and direct you to deliver the remains to the sea in accordance with and subject to your rules and regulations, in accordance with State Law and Federal Regulations.

I/we, of legal age, hereby certify that (1) I am/are the (B) \_\_\_\_\_ of the above named deceased, that (2) I alone have the right to give authorization and direction for said disposition of the cremated remains, and that (3) the deceased left no other direction for the disposition of his/her remains; and I/we hereby agree to defend, indemnify and keep harmless **American Heritage Cremation Society** and their representatives from any and all liability of whatsoever kind, or claim therefore, for whatsoever they, or either of them, may do by virtue hereof.

I the undersigned, do understand that due to the nature of the placing cremated remains at sea, recovery of the remains will not be possible. Return of anything other than certificate of placement at sea, must be arranged prior to engaging our service.

(C) \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Signature of Legally Authorized Person

Printed Name: \_\_\_\_\_ Phone : \_\_\_\_\_

Complete Address: \_\_\_\_\_

(D) \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Signature of Adult Witness

Printed Name: \_\_\_\_\_

### Receipt for Payment of Services and Merchandise

**\$0.00. Simple Cremation Service**

Transportation into our care. Temporary, refrigeration of deceased, Alternative Container production administration and certification of death certificate, documents and permits, plastic cremation container, cremation procedure return of cremated remains and one certified death certificate. \$1200

\$ \_\_\_\_ 2. \_\_\_\_\_

**\$0.00** 3. Initiate Expedite of Death Certificate \$199 (Per case basis)  
Initiate Expedite Cremation \$ 395 (Per case basis)

\_\_\_\_\_  
\_\_\_\_\_

**\$ \_\_\_\_ 4. Formal Cremation Urn Vault**

In addition to the fee of \$89

Description : Vaulting & Hydrating Cremains, Sea Burial in a <http://mackenzievault.com> \$395

**\$89.00** 5. Burial or Scattering at Sea Gulf of Mexico per Per Federal Regulation. Delivered to Sea by the next seasons end after receipt.

\$ \_\_\_\_ 6. Engraving / Personalization : \_\_\_\_ \$59 \_\_\_\_\_

\_\_\_\_\_

**\$0.00** 7. Obituaries \$15 for each additional submission plus Newspaper Fees if applicable

<\$NA> 8. Reduced rate per guidelines on CremationHome.com. Unless other services are requested, this arrangement has been paid in full

**\$ 0.00** 9. 0\_ Additional State of Florida Certified Death Certificates : \$\_\_ each.

**Total:** \$ \_\_\_\_ **Amount Paid :** \$ \_\_\_\_ **Balance Due :** \$ \_\_\_\_ **Paid in Full :** \_\_\_\_  
**Credit Card #** \_\_\_\_\_ **Epiration** \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
**3 Digit on Back** \_\_\_\_\_

**Complete Address on file with Credit Card:** \_\_\_\_\_

**Beneficiary :** \_\_\_\_\_  
(Printed name whom arrangement is for )

**Purchaser Signature :** \_\_\_\_\_

**Copies:**  
\_\_\_\_ File  
\_\_\_\_ 1 Family-Emailed  
\_\_\_\_ Accounting

**American Heritage Representative:** \_\_\_\_\_  
William G D'Addio