



SUBURBAN PET
Crematory Service

Date: _____

AUTHORIZATION FOR CREMATION

Name of Pet: _____

Type of Animal: _____ Date of Death: _____

Owner's Name: _____

Owner's Address: _____

City: _____ State: _____ Zip: _____

Owner's Phone Number: (_____) _____

The undersigned hereby requests and authorizes SUBURBAN PET CREMATORY SERVICE to cremate the remains of the above described animal(s) and certifies and represents that he or she has the right to make such authorization, and agrees to hold Suburban Pet Crematory Service harmless from any liability on account of said authorization and cremation.

Signature _____

This order, fully signed, must accompany remains and be delivered to the Crematory before cremation can be performed.