

**Secure ID & Cremation  
Authorization Form**



MEMORIAL & CREMATION SERVICE, LLC

by  
PAUL W.  
**HARRIS**  
FUNERAL HOME, INC.

570 Kings Highway South, Rochester, NY 14617 • 585.544.2041 • www.harrisfuneralhome.com

**Pet ID#** \_\_\_\_\_ Please read the terms and conditions (reverse side of this document) before completing and signing this document. **Pets at Peace** uses the exclusive **SecurePassages™** pet tracking system. From the time of the initial transfer of your pet into our care, we will attach our pre-numbered **SecurePassages™** pet tracking disk to your pet. When you receive your pet's urn, the same tracking disk will be attached ensuring you the peace of mind that you have received your pet's cremated remains.

**STEP 1: Owner/Pet Information**

Owner/Authorizing Agent: \_\_\_\_\_ Pet's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Species: (Circle One) Dog Cat Other: \_\_\_\_\_ Weight: \_\_\_\_\_ Gender: (Circle One) Male Female  
Breed: \_\_\_\_\_  
Veterinary Hospital: \_\_\_\_\_

**STEP 2: Private Viewing and Witness of Cremation**

**Pets at Peace** has appropriate "pet friendly" facilities for the pet owner and family (both human and pet) to see their pet companion and say their final good-byes prior to the cremation. If the family desires, they can also be present for the cremation process. Our facilities for saying goodbye and our crematory are located at 50 Dubelbeiss Lane, Rochester NY 14622. Please indicate below your desire to either see your pet prior to cremation or be present for the cremation. We will contact you to schedule.

Opportunity to Say Goodbye (circle one) YES NO Witness the Cremation (circle one) YES NO

**STEP 3: Cremation Authorization & Unclaimed Cremated Remains Policy**

I/We \_\_\_\_\_ (print name) represent that I/We have the right to authorize the cremation of the Pet's remains and warrant that I/We are the Owner or an Agent of the Owner. I/We have read and understand the description of the different available cremation processes describe on the Terms and Conditions for Secure ID & Cremation Authorization document (reverse side of this document). By initialing the cremation option below, I/We authorize the following cremation:

Private Cremation: \_\_\_\_\_ Semi-Private Cremation: \_\_\_\_\_ Communal Cremation: \_\_\_\_\_

I/We have read, understand and agree with the terms and service of both this document and the Terms and Conditions for Secure ID & Cremation Authorization document. Furthermore, I/We understand and acknowledge that if my pet's cremated remains go unclaimed for a period of 90 days after the cremation, they may be disposed of in a dignified and non-recoverable manner: (such as scattering).

I/We agree to release and indemnify and hold harmless the Veterinarian, the Funeral Home, the Crematory, their successors, officers, share holders, directors, affiliates, agents and employees, from any and all liability, claims, cost or expense arising from and related to the handling, cremation and release as consistent with the directions, declarations, representations, authorizations and agreements described herein. The obligations of Pets at Peace shall be limited to the cremation of the pet as specified and authorized herein. No warranties, expressed or implied, are made and damages, if any, shall be limited to the amount of the cremation fee paid to Pets at Peace.

Signature(s): \_\_\_\_\_

**STEP 4: Service Selection and Itemization**      **STEP 5: Billing and Payment Information**

- 1) Cremation Option \$ \_\_\_\_\_
- 2) Fur Clipping \$ \_\_\_\_\_
- 3) Private Viewing \$ \_\_\_\_\_
- 4) Urn – Model # \$ \_\_\_\_\_
- 5) Other \$ \_\_\_\_\_
- 6) Other \$ \_\_\_\_\_
- 7) Tax \$ \_\_\_\_\_
- TOTAL DUE \$ \_\_\_\_\_

**Payment is due upon request for service.** For private and semi private cremation, we will contact you when your pet's cremated remains are ready (within 72 hours).

Date Paid \_\_\_\_/\_\_\_\_/\_\_\_\_ Cash \_\_\_\_ Check (#\_\_\_\_\_)  
\_\_\_\_ Credit Card (Please Circle One: VISA MASTER CARD DISCOVER)  
Card # \_\_\_\_\_  
Expiration: \_\_\_\_\_ CVV#: (on back of card) \_\_\_\_\_  
Name on Card: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

PICK-UP & RETURN INFORMATION (completed by **Pets at Peace** Staff)

Date/Time of Pick-Up: \_\_\_\_\_ [ ] Initials Signature of Owner/Veterinarian: \_\_\_\_\_

Date/Time of Urn Delivery: \_\_\_\_\_ [ ] Initials Signature of Recipient: \_\_\_\_\_

Date/Time of Urn Delivery: \_\_\_\_\_ [ ] Initials Signature of Recipient: \_\_\_\_\_

White: **Pets at Peace** Green: Recipient of pet's cremains Yellow: Recipient of pet's cremains Pink: Veterinarian Gold: Pet Parent

