

Prearrangement Funeral Services Appointment of Designated Agent

Prearrangement sales licensees can use this form to keep with their records.

I, _____,
appoint _____
as designated agent to provide decision making authority and financial responsibility for my funeral and/or disposition arrangements.

If my appointed agent is unwilling or unable to serve, I appoint _____,
as contingent agent, having the same responsibilities and obligations as my designated agent.

The designated agent understands:

- A valid written document expressing my wishes regarding the place or method of disposition, signed in the presence of a witness, is sufficient legal authorization for the procedures to be accomplished.
- Any arrangements I have prepaid or filed with a licensed funeral establishment or cemetery authority are not subject to cancellation or substantial revision.
- If arrangements have not been prepaid or filed with a licensed funeral establishment or cemetery authority, the designated agent has full authority of all decision making and financial responsibility.
- If the cost of executing my prearrangement wishes exceeds the amount prepaid by me (if any), the designated agent will assume financial responsibility for the cost of goods and services purchased.

Appointed designated agent

TYPE or PRINT Name	(Area code) Telephone number
Address, City, State, ZIP code	

X

Signature

Date

Contingent designated agent

TYPE or PRINT Name	(Area code) Telephone number
Address, City, State, ZIP code	

X

Signature

Date

Declarant authorizing appointment

TYPE or PRINT Name	(Area code) Telephone number
Address, City, State, ZIP code	

I hereby certify that I am appointing the designated agent/contingent designated agents above.

X

Date and place

Signature

Witness

TYPE or PRINT Name	(Area code) Telephone number
Address, City, State, ZIP code	

X

Signature

Date