**Funeral Home** _____

**Address** _____

**Phone** _____

## "CUSTOMER'S DESIGNATION OF INTENTIONS"

Name of Deceased: _____

Cremation: _____ Chenango Valley Crematorium, Inc.
(Scheduled Date) 3 Preston St., Earlville, NY 13332
(Location of Crematory)

Manner of Disposition of Cremains:

( ) Burial at _____ ( ) Return to _____

( ) Entombment at _____ ( ) Other _____

Disposition of Cremains Designated by: _____
(Signature)

_____
(Address)

_____

_____
(Phone)

"Cremains which shall not have been claimed within 120 days from the date of cremation may be disposed of by this firm, in the following manner of disposition_____."

| (Name of Funeral Director) | (Signature of Funeral Director) | (Date) |
|---|---|---|

**TO BE COMPLETED FOLLOWING CREMATION**

**RECEIPT**

CREMAINS RECEIVED BY:

_____
Print Name

_____
Signature

_____
Date

**CHENANGO VALLEY CREMATORIUM, INC.**
**3 PRESTON ST., EARLVILLE, NY 13332**
(Location of Crematory)

_____
(Manner of Disposition)

_____
(Location)

_____
(Date)

_____
(Name of Person Making Disposition)

_____
(Signature)