

Northern California Aerial Services

7063 Village Parkway
Dublin, CA 94568
925.785.1761
www.airscattering.com



Authorization to Scatter Cremated Remains

<u>Name of deceased:</u>		<u>Sex:</u>	
<u>D.O.B.</u>		<u>County of Death:</u>	
<u>Date of Death:</u>		<u>Date Cremated:</u>	
<u>Funeral Home:</u>		<u>Funeral Director:</u>	
<u>Crematory:</u>			

Location of scattering: _____

By signing below I am certifying that I _____ have the legal right to control the disposition of the remains of the deceased listed above and I am authorizing Eric J. Muetterties/Northern California Aerial Scattering to receive and to scatter the cremated remains of the deceased listed above, and to do so within 60 days of receipt or remains, weather permitting. I agree to hold harmless Eric J. Muetterties/Northern California Aerial Scattering from any and all claims, demands, and or damages which may be made or declared by any of the above or the applicant for the loss of the remains by any other party involved in the transport of the remains to the pickup location. Eric J. Muetterties will be diligent to protect the remains while in his custody and to scatter them in a timely fashion. Eric Muetterties will not be responsible for circumstances outside of his control, such as theft or acts of God. I understand that the scattering of the cremated remains will be completed as close to the location listed above as possible, and in accordance local, state and federal laws. If there is a significant delay due to weather and/or other factors Eric Muetterties will contact you to inform you of such a delay.

I (init.)_____ agree to protect, indemnify, and hold harmless Eric Muetterties/ Northern California Aerial Services and their agents, employees, owners, pilots, successors, and/or assigns against any and all loss, claims or damages (including attorney's fees and costs/expenses of litigation), in connection with the disposition of cremated remains of the deceased and/or transport or mail services associated with the delivery of the remains to the requested destination. The obligation of Eric Muetterties/Northern California Aerial Service Services is limited to the disposition of the cremated remains as directed above.

For these services, I (init)_____ agree to pay Northern California Aerial Services \$ _____

Please make check payable to Eric Muetterties Photography.

Signed _____ Date: _____

Scattering Certificate to be mailed to:

Name: _____

Address: _____

City, State, ZIP: _____

Phone: (_____) _____ - _____

Email: _____