<u>AUTHORIZATION AND INDEMNIFICATION AGREEMENT</u>

Autho	orizatio	n for	Date:	
		(Name of Decedent)		
autho	rized re	epresentative acting on behalf of	ction § 45a-318, the undersigned next of kin or members of the next of kin with legal disposition lecedent, hereby represents and warrants to	
	(N	Name of Funeral Home)	_	
that:	(A)	They have identified the decede otherwise disposed of; and	ent whose remains are to be buried, cremated, or	
	(B)	other disposition of the deceder legal disposition rights, and no	o make arrangements for the burial, cremation, or at or they are a member of the class of persons with other person(s) in such class with legal disposition which the undersigned intends to arrange for the sition of the decedent.	
The u	ndersig	ened agrees to indemnify and hold		
			(Name of Funeral Home)	
incur		said funeral home as a result of an	osts (including reasonable attorney fees and costs) y misrepresentation made to said funeral home in	
			Name of Signatory	
			Relationship to Decedent	
			Address	
			Telephone Number:	
			Email address:	