



Benton County Coroner's Office

2501 N. 4th St. Suite D
Rogers Arkansas 72756
(479) 621-0223 Office / Fax (479) 621-9076

Authorization to Cremate Deceased

(Cremation Requested by Family, before Death Certificate is signed)

Date of Request: _____ Date / Time of Pronounce: _____
Funeral Home: _____ Coroner / Deputy Coroner assigned case: _____
Funeral Director: _____

Name of Deceased: SAMPLE
Date of Birth: _____
Social Security (if known): _____

Reason for Request (i.e., Religious reason, Weekend, D/C not ready, etc.): _____

At this time it appears no additional Coroner or Law Enforcement investigation is being conducted regarding the death of the above named person, No holds have been placed on the remains by the Coroner's Office or the Law Enforcement agency of the jurisdiction where the death occurred. At this time NO outside Law Enforcement agency has contacted the Coroner's office with any concerns or questions regarding the death of the above named.

On the _____ day of _____, 20____, The Benton County Coroner's Office is releasing the remains of: _____, our findings show No reason to delay the cremation while waiting for the Death Certificate to be signed, As long the following is followed:

- The Funeral Home and the Funeral Director named above is required to hold the above named deceased for 24 hrs after the Coroner / Deputy Coroner Pronounce time. **Unless the Following apply, and MUST have Coroner D. Oxford Approval:**
 - Due to a Religious Belief , (i.e. cremated before sun down, etc). Must be approved by Coroner Daniel R. Oxford.
 - Due to Extreme Decomposition of Remains, causing health concerns for funeral home personal. Must be approved by Coroner Daniel R. Oxford.
 - Or any other reason(s) the Coroner decides is an exception.

VOID

Coroner Daniel R. Oxford or Deputy Coroner	Title	Date/Time
(Deputy Coroner's MUST HAVE Coroner Daniel Oxford Verbal Permission to sign)		