

Featheringill Mortuary
 6322 El Cajon Blvd., San Diego, CA 92115
 (619) 583-9511

Information for use on the Death Certificate

Name	First	Middle	Last
Also Known as (<i>include full name</i>):			
Date of Birth:	Birthplace:		Date of Death: Time of Death:
Social Security Number:		Marital Status: Married / Divorced / Widowed / Never Married	
U.S. Military Service? Yes / No / unknown		Branch:	Date Entered: Date Discharged:
Surviving Spouse:	First	Middle	Last (Maiden if female)
Usual Occupation: Title of job, not retired.		Type of Business or Industry	Years in Occupation:
Education (enter the answer from the back of this sheet):			
Race (enter the answer from the back of this sheet):			
Street address of the deceased:			
City:	County (if other than San Diego):	State:	Zip Code: Years in County:
Father of the deceased:	First	Middle	Last name State of Birth:
Mother of the deceased:	First	Middle	Maiden Last Name State of Birth:
Name of the "Informant" and relationship to the deceased:			
Mailing Address of the "informant":			
Informant's Phone numbers: (Only used by mortuary to contact you)			
Email: (Only used by mortuary to contact you)			

AUTHORIZATION TO ACCEPT OR DECLINE EMBALMING

TO: Featheringill Mortuary
(Funeral Establishment Name)

RE: _____
(Decedent)

Embalming is the addition to, or the replacement of, body fluids by chemical preservatives or the application of chemical preservatives for the temporary preservation of the body. I understand that embalming is not required by law.

I, _____, do ___ do not ___ (Check one) request embalming.

I understand that for storage or embalming purposes the decedent may be transported to the following location:

Featheringill Mortuary - 6322 El Cajon Blvd, San Diego, CA 92115
(Location Name and Address)

The undersigned hereby represents that he/she has the legal right to control disposition of the remains of the decedent.

Signed: X _____, Relationship to Decedent: _____
Executed this ___ day of _____, at _____
(Month) (Year) (City and State)

This section is to be completed by the funeral establishment if authorization to accept or decline embalming is obtained orally.

The above statement regarding embalming and storage was read and/or provided to _____, Relationship to Decedent: _____
who did ___ did not ___ (check one) authorize embalming at the above named funeral establishment. Telephone Number: _____
Date and time authorization granted: _____

This section is to be completed by the funeral establishment representative who is executing this authorization to accept or decline embalming.

I declare under penalty of perjury that the foregoing is true and correct.

Executed this ___ day of _____, at _____
(Month) (Year) (City and State)

Funeral Establishment representative (print name) _____
Funeral Establishment representative (signature)

Disclosure of Preneed Funeral Agreement

The funeral establishment, Featheringill Mortuary (funeral establishment name) license number FD 1083, DOES, DOES NOT (check one) have a preneed arrangement, as defined below, made by or on behalf of (name of decedent)

If the funeral establishment does have a preneed agreement, complete the following: In compliance with Business and Professions Code Section 7745, the funeral establishment has presented to the person named below a copy of any preneed agreement which has been signed and paid for in full, or in part by, or on behalf of the deceased and is in the possession of the funeral establishment. Signature of funeral establishment representative Date

"Preneed arrangement," "preneed agreement" or "preneed" is written instruction regarding goods or services or both goods and services for final disposition of human remains when the goods or services are not provided until the time of death, and may be either unfunded or paid for in advance of need.

Funeral Establishment's Responsibility - Business and Professions Code Section 7745 requires a funeral establishment to present to the survivor of the decedent or the responsible party a copy of any preneed agreement in its possession which has been signed and paid for in full, or in part by, or on behalf of the deceased. Business and Professions Code Section 7685.6 requires a copy of any preneed arrangements to be disclosed prior to drafting any contract for funeral goods or services. The funeral establishment may present the copy in person, by certified mail, or by facsimile transmission, as agreed upon by the person with the right to control disposition. A funeral establishment that knowingly fails to present a preneed agreement as required is liable for a civil fine equal to three times the cost of the preneed agreement, or one thousand dollars (\$1,000), whichever is greater.

You may contact the Cemetery and Funeral Bureau for more information on funeral, cemetery or cremation matters or to file a complaint against a licensee:

Cemetery and Funeral Bureau
1625 North Market Blvd., Suite S-208
Sacramento, CA 95834
916-574-7870

Signature of the survivor or responsible party

Date

Print name of the survivor or responsible party

Signature of funeral establishment representative

Date

Print name of funeral establishment representative

Title

The funeral establishment must:

- Give a copy of the completed statement to the survivor or responsible party.
Retain the original or a copy of the completed disclosure statement on file for not less than one (1) year after the preneed account has been audited by the Bureau or seven (7) years from the date the disclosure statement was made, whichever comes first.

FEATHERINGILL MORTUARY
FEATHERINGILL COLLEGE CENTER CHAPEL
6322 El Cajon Blvd.
San Diego, California 92115
State License # FD1083

ACKNOWLEDGMENT OF DISCLOSURE/DISCLAIMER

The Federal Trade Commission Trade Regulation Rule for "Funeral Industry Practices" requires certain disclosures and prohibits misrepresentations. This Acknowledgment of Disclosure/Disclaimer form is a check list we ask those we serve to read and sign if during the arrangements for the funeral of



(NAME OF DECEASED)

1. I/We were shown/given a General price List effective on January 28, 2014 prior to discussing prices, services or merchandise.
2. I/We were shown/given a Casket Price List effective on December 2, 2013 prior to discussing prices or caskets.
3. I/We were not told that embalming is required by law and were told that the law does not required embalming except in certain special cases. If embalming was provided, it was done with my/our permission.
4. I/We were not told that any law requires embalming for direct cremations, immediate burial, a funeral using a sealed casket, or if refrigeration is available and the funeral is without viewing or visitation and with a closed casket.
5. I/We were not told that any law requires a casket for direct cremation or that a casket other than an unfinished wood box is required for direct cremation or for direct disposition.
6. 7. I/We were told that state law does not require the purchase of an outer burial container or any of the funeral goods or services I/we selected except as set forth on the statement of funeral goods and services selected.
7. No claims were made to me/us as to the merchandise or other offerings of this funeral firm (embalming, casket, outer burial container) to the effect that embalming or the use of any merchandise available from the funeral firm would delay the decomposition of the remains for a long term or indefinite time, or that any such merchandise would protect the body from graveside substances if such was not the case. No representations or warranties were made to us about the protective features of caskets or outer burial containers other than those make by the manufacturer. The only warranties, expressed or implied, granted in connection with goods sold with the funeral service we arranged were the expressed written warranties, if any, extended by the manufacturers of such goods. No other warranties were extended to us.
8. I/We were told that the amount of each of the cash advance items was the cost to the funeral firm except were such was the case. I/We were told that the funeral firm's cost may be different based on volume or cash discounts or other professional/trade customs where permitted by state or local law.
9. I/We were shown/given a State of California Department of Consumer Affairs' "Consumer Guide to Funeral & Cemetery Purchases".

Signed this _____ day of _____, 20____.

Witnessed:

(Signature of Funeral Firm Representative)

~~_____~~
(Signature of Funeral Purchaser)

(Relationship to Deceased)