



YORK COUNTY CORONER

YORK COUNTY ANNEX

118 PLEASANT ACRES ROAD • YORK, PENNSYLVANIA 17402 • Phone 717-840-7617 • Fax 717-840-7618

PAMELA L. GAY, RN BS D-ABMDI CFN®, York County Coroner

**A COMPLETED COPY/WORKING COPY OF A VALID AND SIGNED CERTIFICATE OF DEATH
MUST BE FAXED OR EMAILED WITH THIS REQUEST.**

REQUEST FOR CREMATION APPROVAL

Instructions: Please complete this form and fax/email to us with a copy of the Certificate of Death.

Send by facsimile to 717-840-7618 or email to slwilt@yorkcountypa.gov and plgay@yorkcountypa.gov.

There is a \$50 fee for cremation approval in York County. (A separate statement will be mailed for payment)

Date _____ Requesting Funeral Home _____

Crematory Name _____

Address _____

City/State/Zip _____

Return Fax (_____) _____ Phone (_____) _____

The above-referenced funeral home hereby requests approval for the cremation of:

_____ who died on _____ at _____ AM/PM
(Name of deceased) (Date) (Time)

*A FEE WAIVER (York Co. Resolution 2014-07) is requested because:

___ Decedent is less than 18 years of age OR ___ Decedent is U.S. Veteran OR

___ Individual decedent assets total less than \$10,000 or jointly held assets total less than \$20,000

(*Signature required as follows)

***I hereby certify that the decedent's assets are individually less than \$10,000 or jointly less than \$20,000**

(Estate Executor/Executrix/Financially Responsible Party Signature)

***NOTE Cremation Authorization fee plus late fee WILL be applied if estate later filed.**

The York County Coroner, York, PA, grants approval for cremation of the remains of the above deceased any time after (date) _____ at _____ AM/PM. Approval indicates receipt and review of the death certificate for required elements and does not indicate any additional investigation by the York County Coroner. If manner of death is "pending investigation", the Coroner certifies that all tissues and bodily fluids required to complete said investigation have been retained, and permission to cremate the remains is granted without qualification.

Coroner/Deputy Coroner _____ Permit # _____

Please allow a 4-hour response time during business hours.

Requests received by the Coroner's office will be attended to Monday through Friday, 8 a.m. to 4:30 p.m.

PLEASE NOTE: Submit weekend E-fax requests only to 717-222-5500,

Friday 4:30 p.m. through Saturday @ 12 noon. All other requests will be attended to the next business day.

OFFICE USE ONLY: FEES WAIVED Veteran Child Financial