



# GardenHill Funeral Director Service, Inc.

206 E. 8<sup>th</sup> Avenue, Roselle, NJ 07203

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NJ Lic. No. 4156

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## AUTHORIZATION FOR REMOVAL

\_\_\_\_\_  
*(Name of Institution)*

To release the body of \_\_\_\_\_

*(Deceased)*

To **GardenHill Funeral Director Service, Inc.** and/or its agents.

I, \_\_\_\_\_ verbally authorize the above named funeral home and/or its agents to remove, embalm and prepare for final disposition the remains of \_\_\_\_\_ my \_\_\_\_\_.

I attest that I have the legal authority to take this action.

Per \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

I, \_\_\_\_\_ authorized the above named funeral home and/or its agents to remove, embalm and prepare for final disposition the remains of \_\_\_\_\_ my \_\_\_\_\_.

I attest that I have the legal authority to take this action.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Tel.: \_\_\_\_\_