



PET CREMATION & CHAIN OF CUSTODY AUTHORISATION FORM

I (Client's Name:) \_\_\_\_\_ have chosen

Newcastle and Hunter Pet Crematorium

462 Marsh Rd Bobs Farm

NSW 2316 [receptionnhpc@gmail.com](mailto:receptionnhpc@gmail.com)

4982 6395

as my preferred Crematorium for the cremation of my loved one.

I authorise for their company representative to collect

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

from

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

to perform an individual cremation for my abovementioned pet.

Clients Authorisation

Signature \_\_\_\_\_

Date \_\_\_\_\_