

Form 4
Queensland
Cremations Act 2003
(Sections 5 and 6)
PERMISSION TO CREMATE (INDEPENDENT DOCTOR)

Please print all information on this form.

I, _____
(print name of independent doctor)

of, _____
(print business address of independent doctor)

Telephone number: _____

state: _____

1. I have received an application from: _____
(print applicant's name)

whose address for service is: _____

(print address for service as stated in the Application for Permission to Cremate)

to cremate the human remains of:

Name of deceased person: _____

Usual or last known address of deceased person: _____

Date and place of death of deceased person: (if known) _____

Age of deceased person: (if known) _____ Date of birth of deceased person: (if known) _____

2. The application was accompanied by: **(Tick appropriate boxes)**

a copy of cause of death certificate issued for the deceased person; and

a cremation risk certificate for the deceased person

(Note: a cremation risk certificate is not necessary if the cause of death certificate is not a Queensland cause of death certificate and a cremation risk certificate has not been issued for the deceased person – section 6(4) and (5) of the Cremations Act 2003.)

or

a certificate that authorises the release of the body given by a coroner, or person holding a position equivalent to a coroner, at the place where the death happened.

3. I have examined the human remains and have made any necessary inquiries and am reasonably satisfied that:

- the human remains do not pose a cremation risk; and
- the deceased person's death is not a reportable death under the *Coroners Act 2003*.

Note: Human remains pose a cremation risk if the remains contain something that, if cremated, might expose someone to the risk of death, injury or illness (for example, a cardiac pacemaker or radioactive implant: section 6(7) of the Cremations Act 2003).

4. To the best of my knowledge I am not aware of any objection by a spouse, adult child, parent or personal representative of the deceased person which prevents me from issuing a Permission to Cremate the human remains.

Note: The Permission to Cremate cannot be issued if there is an objection from one of the persons referred to (section 8(2) of the Cremations Act 2003) unless the deceased person left signed written instructions that his/ her human remains be cremated (section 8(1) of the Cremations Act 2003).

5. I give permission for the human remains to be cremated.

Signature of independent doctor issuing the Permission to Cremate: _____

Date of issue of the Permission to Cremate: _____

Note:

1. An independent doctor is a medical practitioner under the *Medical Practitioners Registration Act 2001*, schedule 3, that is, a person registered under the *Medical Practitioners Registration Act 2001* who did not sign:

- the cause of death certificate; or
- the cremation risk certificate.

It does not include a person who, in another State or country, is equivalent to a doctor: schedule of the Cremations Act 2003.

2. Section 9 of the *Cremations act 2003* prohibits a person from issuing a permission to cremate where the person reasonably suspects that he/ she or his/ her spouse may receive a benefit because of a person's death.

3. The permission to cremate can be sent to the applicant, or person nominated by the applicant on the application, by fax or other electronic means: section 6(9) of the *Cremations Act 2003*.