

**Authorization for the release of remains of the decedent to**

**Heflebower Funeral & Cremation Services**

1. **Heflebower Funeral & Cremation Services**, 8955 S. Ridgeline Blvd. Ste. 100, Highlands Ranch, Colorado 80129 – 720-344-6087
2. Representative(s) and relationship(s) Authorized to release:  
**NAME/RELATIONSHIP:** \_\_\_\_\_
3. Decedent **NAME:** \_\_\_\_\_
4. Institution to be released from: **Adams County Coroner, Brighton, Colorado**

The representative(s) warrants and represents to Heflebower Funeral Services that the representative is the person or the appointed agent of the person who by law has the paramount right to arrange and direct the disposition of the remains of the decedent and that no other person(s) has a superior right over the rights of the representative(s).

The representative(s) authorizes the above-mentioned institution to release the remains of the decedent to Heflebower Funeral Services and/or its agents.

The representative(s) agrees to indemnify and hold harmless Heflebower Funeral Services from any claims or causes of action arising or related in any respect to this authorization for removal or Heflebower Funeral Services reliance thereon.

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

Signature of Representative(s)

X \_\_\_\_\_  
\_\_\_\_\_

Please release any personal items with the deceased.

\_\_\_\_\_ - Funeral Representative

