

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.