

**REQUEST FOR CREMATION APPROVAL FROM THE OFFICE OF THE CORONER  
LANCASTER COUNTY, PENNSYLVANIA**

Complete this form and attach a copy of the Certificate of Death;  
send by courier, mail or facsimile to the  
Office of the Coroner, 2080 Spring Valley Road, Lancaster, PA 17601

**Fax 717-735-2138**

The fee for this cremation approval is **\$50.00.**

Date \_\_\_\_\_ Requesting Funeral Home \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone# (        ) \_\_\_\_\_ Return Fax# (        ) \_\_\_\_\_

Name of Crematory \_\_\_\_\_

The above-named funeral home hereby requests  
approval for the cremation of (name of deceased) \_\_\_\_\_

who died on (date) \_\_\_\_\_ at \_\_\_\_\_ AM/PM

**A valid and signed Certificate of Death MUST be attached**

The Coroner of Lancaster County grants approval for cremation of the remains of the above deceased

**ANYTIME AFTER** (date) \_\_\_\_\_ at \_\_\_\_\_ AM/PM

Chief Deputy Coroner Eric Bieber \_\_\_\_\_  
First Deputy Coroner Casey Buckley \_\_\_\_\_  
Deputy Coroner Anne Lewis \_\_\_\_\_  
Deputy Coroner W. Wayne Hopkins \_\_\_\_\_

Deputy Coroner Nichole Remy \_\_\_\_\_  
Deputy Coroner Madyson Love \_\_\_\_\_  
Deputy Coroner Dr. Richard Graff \_\_\_\_\_

(Signed) \_\_\_\_\_

**Invoices will be emailed or faxed at the beginning of each month. Please send a photocopy of the  
invoice along with full payment to:**

Office of Lancaster County Coroner, 2080 Spring Valley Road, Lancaster, PA 17601

Make check payable to Office of Lancaster County Coroner

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For your records

Name (Funeral Home):

Decedent's Name:

Due 30 Days:

Check #:

\_\_\_\_\_

\_\_\_\_\_

From Receipt  
\$50.00

\_\_\_\_\_