

**Authorization for Bay Maritime Services, LLC for Ash Burial at Sea**

Date of authorization: \_\_\_\_\_

I/We the undersigned hereby request and authorize “**BAY MARITIME SERVICES, LLC**” (hereby referred to as “**BMS-LLC**”) to take possession of and make arrangements for, the dissemination of the cremated remains of \_\_\_\_\_, (hereby referred to as the “Deceased”) in accordance with and subject to: a) the terms and conditions set forth in this Authorization; b) “**BMS-LLC**”’s Rules and Regulations; and c) any applicable federal, state, provincial or local laws and regulations.

I/We hereby authorize “**BMS-LLC**” to disseminate the cremated remains of the Deceased at sea in the offshore waters of the State of Rhode Island. I/we hereby direct “**BMS-LLC**” to disseminate said cremated remains at sea, in accordance with State and Federal Law.

Special Instructions:

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Check all that apply and enclose proper payment with the Cremated Remains: (See rate section for price of services and options.)

Dissemination to be witnessed by Family or performed by family (6 people maximum

OR

Dissemination from “**BMS-LLC**” private yacht with reading to be performed by Captain

A floral bouquet floated with the cremated remains.

Additional copies of full color memorial certificates. # Requested \_\_\_\_\_

Ash Burial will be performed by the Captain at the convenience of “**BMS-LLC**” and based on appropriate and safe weather conditions.

Dissemination consists of the scattering of cremated remains at sea. I/We understand that once the cremated remains of the Deceased are disseminated, they are unrecoverable. The Captain and a witness will provide a certificate recording latitude and longitude (exact location) of the dissemination.

The obligation of “**BMS-LLC**” shall be limited to the disposition of the cremated remains as directed herein.

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Signature	Print Name	Relationship to Deceased
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Address	Telephone Number	

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Signature	Print Name	Relationship to Deceased
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Address	Telephone Number	

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Make 3 copies: Original to "**BMS-LLC**" ~ Copy to Funeral Director ~ Copy to Client

Print this form for your use.