

PURE REFLECTIONS RESOMARIUM

CORONER'S CERTIFICATE FOR RESOMATION

I Certify that:-

I am satisfied that there are no circumstances likely to call for further examination of the body.

PARTICULARS OF DECEASED PERSON

Full Name	<input type="text"/>
Sex	<input type="text"/>
Age	<input type="text"/>
Date of Death	<input type="text"/>
Place of Death	<input type="text"/>

(Please insert name here in block capitals)	<input type="text"/>		
Signature	<input type="text"/>		
Coroner for the	<input type="text"/>	of	<input type="text"/>
Date	<input type="text"/>		

NOTE: RESOMATION DOES NOT REQUIRE ANY ARTIFICIAL IMPLANTS TO BE REMOVED BEFORE THE PROCESS.

NOTE: This Certificate is issued for the purpose of Resomation only and must be delivered to **the Funeral Director or Pure Reflections Resomarium** as soon as possible.
The Resomation cannot be proceeded with unless this Certificate is so delivered.

Pure Reflections Resomarium Contact Details:
Telephone: 01-969-6990 Email: info@purereflections.ie