

Financial Transparency is Important

We are privileged to assist your family with the preparation and organising of a farewell Ceremony.

We acknowledge this is a stressful time for most people, and making decisions while under stress requires all those involved to be sensitive as well as transparent about costs that are being incurred.

While we do not wish to make the time of arranging a funeral all about cost, we are required to disclose with as much clarity as possible, the financial impacts of your decisions. A detailed written estimate will be provided to you either on the day of the arrangement or the following day. *Please note that items and services you request following this initial arrangement meeting will increase the estimate accordingly.*

Funeral Authority Form

Our company Funeral Authority Form provides the following:

- A representative of the family gives our company the legal authority to carry out the funeral arrangements.
- It outlines the financial conditions on which we agree to provide our services.
- It acknowledges the person as guarantor of the funeral debt should there be insufficient funds in the estate, or there is no estate to pay for the funeral.
- It authorises us to obtain a credit check.

Please read the Funeral Authority form carefully and if you have any questions or concerns please raise them with your funeral director as soon as possible.

Who can sign the Funeral Authority Form

We are obliged to ensure that the person going guarantor is fully aware of the financial commitment they are making, and that they have the financial means available to pay for the funeral that has been arranged.

With this in mind, our company requires the person signing the funeral authority form to meet the following criteria:

- Must be over 25 years of age
- Must be in <u>full time</u> employment
- Retired spouse or relative can sign only if the funeral account will be settled in full 6 weeks from the date of death or the account is going to a lawyer or public trustee and they confirm there are sufficient funds in the estate to cover the funeral costs.
- Must be living in New Zealand and have a clean Credit history.

Funeral Authority Form

Deceased:			DOB:
	(Full Name)		
l,	(Full Name)		DOB:
Address:			
Occupation:		Status:	(Executor / Next of Kin / Other)
Home phone:	Mobile	Email:	
do hereby authorise:		ne of Funeral Home)	
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To make all funeral arrangements for the above-named deceased, and to carry out any embalming treatment in your judgement reasonably required and to make such other arrangements that I might require and advise.

2. To incur and pay on behalf of the estate of the said deceased, all normal and necessary other charges in relation to the funeral arrangements, and to recover such other charges and the funeral costs (an estimate of which we have given to you below) from the estate. Note 15% may be added to all other charges we pay on the estates behalf. Funeral costs and other charges shall bear interest at the rate of 1.5% per month, after the expiry of 2 months from the date of death.

I HEREBY FURTHER AGREE to accept personal liability for the funeral costs and other charges and interest if these are not paid by the estate of the deceased within 6 months of the date of death.

3. I HEREBY AGREE to indemnify the Funeral Home against all costs, claims and proceedings arising out of any error or omission in the instructions given by me in connection with the arrangements for, or the conduct of, the funeral and burial/cremation of the deceased, or arising out of any defect or lack of authority to give such instructions.

- 4. I HEREBY FURTHER AGREE to your following terms and conditions of trade.
 - 4.1 If I do not pay the account by the due date for payment, you may charge interest on the unpaid amount; the terms and interest rate are set out in point 2 above. You may also suspend or restrict the services that you provide me and require me to pay any costs that you incur internally or externally (including commissions and/ or legal fees) in recovering the money I owe or in exercising your other rights.
 - 4.2 Any burial plots remain the property of the Funeral Home until such time as the funeral account has been paid in full including any interest that may have been incurred.
 - 4.3 Privacy Act 1993. I acknowledge that you are asking me for my personal information which you may then provide to a Credit Reporting Service to obtain a credit check on me.

I understand that the Credit Reporting Service will give you information about me, and will then hold my information that you provided on their system and this will be used to provide credit reporting to other companies doing credit checks authorised by me in the future.

- 4.4 If I default in my payment obligations to you:
 - Information about that default may be given to company employees or contractors for debt collection, or in the event that the company assigns any of its rights to any other party, to the party receiving those rights.
 - The default may be listed with the Credit Reporting Service and this information will then be given to other companies doing credit checks authorised by me in the future. This includes allowing you to use the Credit Reporting Services monitoring facility to enable you to receive updates if any information held about me changes.
- 5. Our company's estimate of costs which may be incurred following this initial funeral arrangement is shown below. This estimate should only be used as a guide, as further arrangements incurring additional costs may be requested following this initial interview.

6. If a cremation service please indicate who is authorised to collect the ashes:

Amount disclosed at this time: ____

____ (includes GST)

Signature: _

Date: .

Payment Options

\ \ /~··	Id you like to settle the funeral account prior to the funeral?
	account number is 03 0162 0195824 000 e ensure you use the funeral number or your surname as a payment reference
	paying by Credit Card – please note transactions incur a 2.3% card processing charge.
	ticked YES – please sign at the bottom of this page
	ticked NO – please continue
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Your	place of work / or write if retired here
Work	c phone number Confirm this is full time employment \Box Yes \Box
Pleas	e let us know how the funeral account will be settled:
	I personally have funds and I will pay the funeral account in full within 6 weeks.
	The estate has funds to cover the funeral costs and this will be administered by a lawyer or trustee company. If the estate is unable to release payment within 6 weeks, I personally have funds and wil the account in full if requested to do so.
	Lawyers Name & Law Firm
	I am relying on Insurance to pay for the funeral – we require emailed confirmation from the Insura Company that the policy is eligible for the full benefit payment as disclosed to us.
	I am relying on other family members to share the funeral costs or donations.
	If family payments or donations do not cover the cost of the funeral – I can afford to make
	payments of \$ □ Weekly □ Fortnightly
	I understand 1.5% interest is charged on unpaid balance each month (18% per annum).
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The i	nformation provided on this form is true and correct
	e Signature
Name	
	0'8'''''''
Date:	
Date: Office	
Date: Office I. Pro 2. Mar	Use Only – if indicated funeral will or may need to be paid off cess credit check entering Name/DOB/Sections 5A & 5B from driver's license. nager or GB or SR will need to approve – note a deposit may be required.
Date: Office I. Pro 2. Mai 3. If ap	Use Only – if indicated funeral will or may need to be paid off cess credit check entering Name/DOB/Sections 5A & 5B from driver's license.
Date: Office I. Pro 2. Mai 3. If ap • 7	Use Only – if indicated funeral will or may need to be paid off cess credit check entering Name/DOB/Sections 5A & 5B from driver's license. nager or GB or SR will need to approve – note a deposit may be required. opproved we require the following from the family prior to them leaving or prior to the day of the funeral: