

ONLINE CREMATION AUTHORIZATION REQUEST GUIDE

1. Access the Allegheny County Office of the Medical Examiner website and navigate to the Funeral Home Resources Section. Select “Online Cremation Authorization Request”

HOW DO I...
SEE MORE
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> Government > Legal & Public Safety > Medical Examiner > Funeral Home Resources

Funeral Home Resources

Forms

- [Release of Remains Form](#)
- [Autopsy Waiver Form](#)
- [Autopsy and Toxicology Results Request Form](#)
- [Release of Rights to Another Person Form](#)
- [Release of Rights to the County Form](#)

Cremation Authorization Request

The Allegheny County Office of the Medical Examiner (ACOME) is responsible for authorizing all cremations request for decedents of Allegheny County. ACOME will determine if authorization is granted upon review of the formal request and a valid and complete PA State Death Certificate. There are two methods to request a cremation authorization.

1. **Fax**

Fax the funeral home letter head indicating the name of the funeral home, phone and fax numbers of the funeral home and the valid and complete death certificate to 412-350-4899. Upon completion of the authorization, a signed authorization form will be faxed back to the designated Funeral Home fax number.
2. **Online**

Utilizing the link below, complete the data entry cremation authorization request fields *all are required*. It is required to upload a valid and complete death certificate. At the bottom of the request field there is an option to select return of the cremation authorization via email or fax. The email will only be sent to a valid funeral home email address. If you are unsure if your funeral home email address is on file with ACOME, please call 412-350-4800 and ask to speak with a supervisor.

[ONLINE CREMATION REQUEST](#)

Please be patient and understanding as we process the high volume of cremation authorization requests. The members of ACOME will respond as quickly as possible to your request.

2. The following Cremation Authorization Request form will appear.

Online Cremation Authorization Requests

* Required Fields

Deceased's Information

Last Name*
LAST NAME

First Name*
FIRST NAME

Middle Initial
MIDDLE INITIAL

Cause of Death*
Describe cause of death here

Manner of Death*
-- Select Manner of Death --

Date of Death*
mm/dd/yyyy

Date of Cremation*
mm/dd/yyyy

Physician Information

Physician License Number
Physician License Number

Physician Address Line 1
Physician Address Line 1

Physician Address Line 2
Physician Address Line 2

Physician City
City

Physician State*
-- Select State --

Physician Zip
Zip

Physician Last Name
Physician Last Name

Physician First Name
Physician First Name

Funeral Home Information

Funeral Home Name*
 Check here if your funeral home is not listed below
-- Select Funeral Home --

Response Method*
Choose how you want to receive the Cremation Authorization.
 Use my email/fax on file with the ME's Office
 Use this method: (must complete either Email or Fax if choosing this option.)

Email

Fax

Please upload any documentation supporting the Cremation Authorization.

Browse

Upload File
Submit

3. Complete the entire form including all fields with the information provided on the Death Certificate. If the information is not completed properly, it may delay your authorization being approved. NOTE: The Date of Cremation must be on or after the date of the request. A cremation authorization will NOT be issued with a date in the past.

Online Cremation Authorization Requests

* Required Fields

Deceased's Information

Last Name*
LAST NAME

First Name*
FIRST NAME

Middle Initial
MIDDLE INITIAL

Cause of Death*
Describe cause of death here

Manner of Death*
-- Select Manner of Death --

Date of Death* **Date of Death is Required**
mm/dd/yyyy

Date of Cremation* **Date of Cremation is Required**
mm/dd/yyyy

Physician Information

Physician License Number
Physician License Number

Physician Address Line 1
Physician Address Line 1

Physician Address Line 2
Physician Address Line 2

Physician City
City

Physician State*
-- Select State --

Physician Zip
Zip

Physician Last Name
Physician Last Name

Physician First Name
Physician First Name

4. Select the specific Funeral Home (verify the correction address location) requesting the Cremation Authorization. This is the Funeral Home that will subsequently be billed as well.

The screenshot shows a form titled "Funeral Home Information". Below the title is the label "Funeral Home Name*" followed by a dropdown menu with the text "-- Select Funeral Home --". Below this is a checkbox labeled "Check here if your funeral home is not listed below".

5. If the Funeral Home is not listed, select the check box and the fields will appear to provide the Funeral Home information.

This screenshot shows the expanded form. At the top, it says "Funeral Home Information" and "Funeral Home Name*". Below that is a checkbox "Check here if your funeral home is not listed below" which is checked. Underneath is a dropdown menu "-- Select Funeral Home --". The form then contains several input fields: "New Funeral Home Name*", "New Funeral License Number", "New Funeral Home Address", "New Funeral City", "New Funeral Home State*", "New Funeral Home Zip", and "New Funeral Home Phone Number".

6. Response Method

Cremation Authorizations can be emailed or faxed to the funeral home.

If you are unsure if the correct email address is already on file with the ACOME please be certain to specify where the request is to be sent.

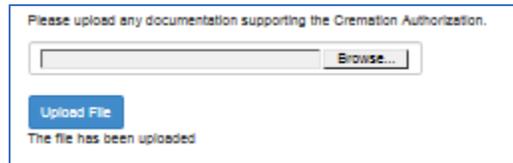
The screenshot shows a form titled "Response Method*" with the instruction "Choose how you want to receive the Cremation Authorization." There are two radio button options: "Use my email/fax on file with the ME's Office" and "Use this method: (must complete either Email or Fax if choosing this option.)". Below these are two input fields labeled "Email" and "Fax".

7. Upload of the Death Certificate and/ or Medical Certification

Use the Browse button to locate the file you would like to upload. Once the file is selected it is imperative that you select Upload File.

The screenshot shows a section titled "Please upload any documentation supporting the Cremation Authorization." It features a text input field with a "Browse..." button to its right. Below this is a blue "Upload File" button.

8. Once the file has been uploaded a confirmation will appear as seen below.



The screenshot shows a web interface for file upload. At the top, it says "Please upload any documentation supporting the Cremation Authorization." Below this is a text input field with a "Browse..." button to its right. Underneath the input field is a blue button labeled "Upload File". At the bottom of the interface, a confirmation message reads "The file has been uploaded".

Once the Submit button is selected the Cremation Authorization Request will be sent to ACOME to be processed. Please be patient and understanding as we process the high volume of cremation authorization requests. ACOME staff will respond as quickly as possible to your request.