

READ CAREFULLY

This permit is authority for disinterment and reinterment of a human body and can be issued to a licensed funeral director upon submission of a properly completed affidavit.

All disinterments must be conducted in accordance with Act No 368, P.A. 1978, and rules of the Michigan Department of Community Health.

No body shall be disinterred for removal unless a permit has been issued by the local health officer in whose jurisdiction the cemetery is located. No disinterred body shall be accepted for transportation by common or contract carrier unless it has been enclosed in a container which will insure against leakage, offensive odors and other menaces to the public health and safety to its destination. Disinterred bodies may be transported by private vehicles under the supervision of a licensed funeral director when enclosed in a suitable container which will insure against leakage, offensive odors, and other menaces to the public health and safety. Any special instructions issued by the health officer shall be followed. The licensed funeral director in charge of a disinterment shall be responsible for the proper conduct of the disinterment and removal.

At the time of disinterment, one copy of this permit must be endorsed by the sexton or person in charge of the cemetery or place from which the deceased is removed and filed permanently as part of the records of the cemetery. The other copy is to accompany the body as a burial permit. If reinterment takes place within the State of Michigan, it shall be accepted, endorsed by the sexton or person in charge of the place of reburial, and filed permanently as part of the records of the cemetery.

Completion and penalties as prescribed by Act 368, P.A. 1978

DISINTERMENT AND REINTERMENT PERMIT
MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
Act 368, P.A. 1978

NO. _____

Permission is hereby given to _____ to disinter the remains of _____ who died _____, _____ at _____ at the age of _____ the cause of death being given as _____ now buried in _____ Cemetery _____ county; and to remove the same for reinterment in _____ Cemetery at _____

said disinterment, removal, and reinterment to be so conducted in conformity with the laws of this State and rules of the Michigan Department of Community Health as not to endanger the public health.

Special instructions _____

Health Officer _____ County _____

Approved for cremation Medical Examiner _____ Date _____

Endorsement of sexton of cemetery where disinterred
Sexton _____ Date _____

Endorsement of sexton where interred
Sexton _____ Date _____

THIS PERMIT MUST ACCOMPANY THE BODY TO DESTINATION