

# Indiana State Department of Health PERMIT TO DISINTER, REMOVE AND REINTER HUMAN REMAINS

Dated: ...February..15,..2001.....

To.....(Per Court Order).....

Funeral Home: .....

Application having been made in prescribed form, permission is hereby granted to disinter, remove, and reinter the human remains herewith described.

Name of Deceased.....Unknown.....

Name of Cemetery where remains are now interred.....Adams Cemetery..... Date of Burial.....Unknown.....

Name of Cemetery where remains are to be reinterred or place where they are to be sent.....New Chapel Cemetery.....



Indiana State  
Department of Health

State Registrar

HOLDER SHOULD PRESERVE THIS PERMIT

If these remains are to be transported, a transportation permit will be issued by the local health officer.

23-14-57-1 Requirements for disinterment  
Sec. 1. The remains, either cremated or uncremated, of a deceased human shall not be removed from a cemetery without:  
(1) a written order of the state department of health;  
(2) the written consent of:  
(A) the owner of the cemetery; or  
(B) the owner's representative; and  
(3) the written consent of:  
(A) the spouse of the deceased; or  
(B) the parents of the deceased in the case of a deceased minor child;  
or a court order  
authorizing the disinterment, disinterment, disinterment, or disinterment.