

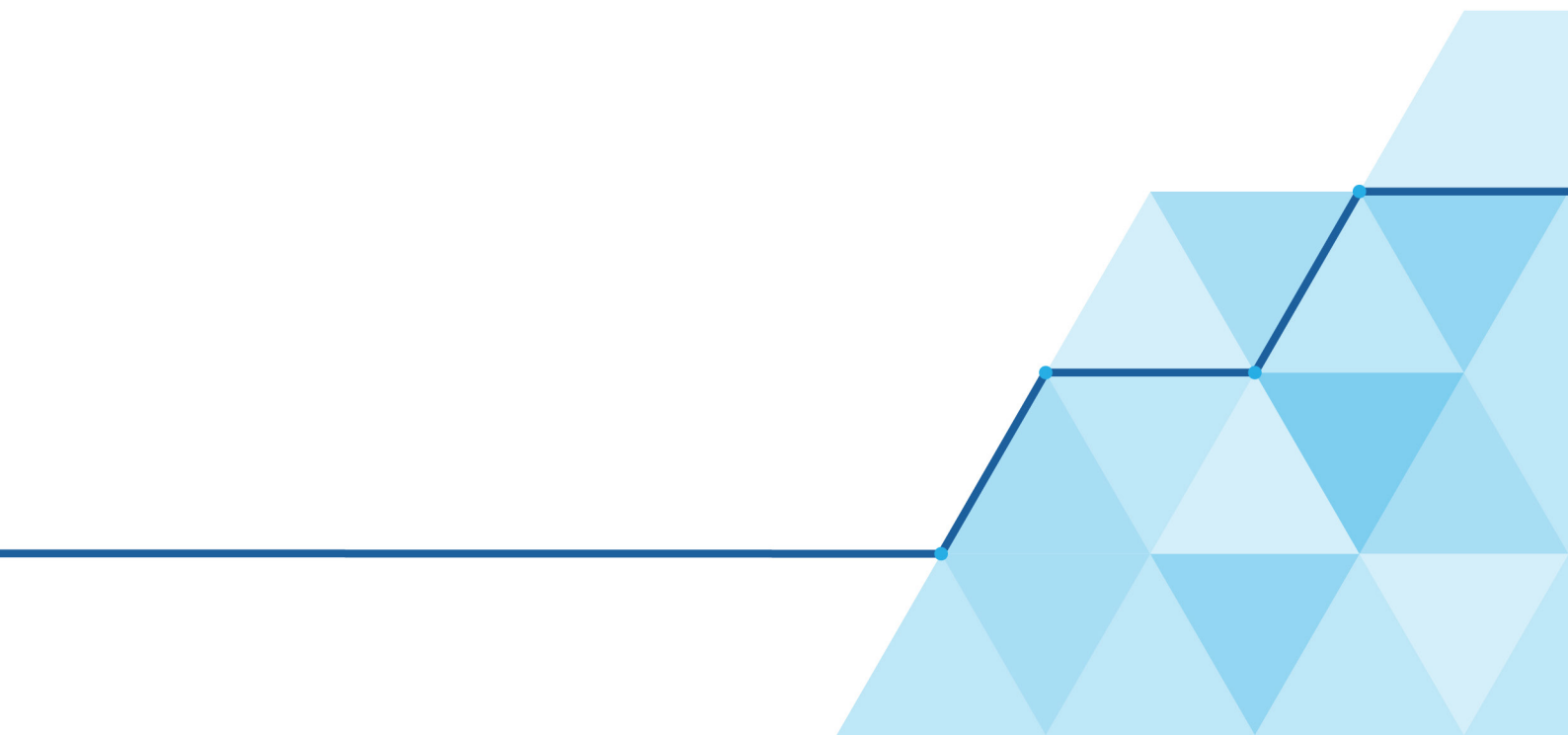


Ministry
of Justice

The Cremation (England and Wales) Regulations 2008

Guidance for applicants

September 2024



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Introduction

1. This guidance is intended to help those applying for the **cremation** of a person who has died. It is intended to help you navigate the system.
2. **As you go through this process, your crematorium or funeral service provider (such as a funeral director or a direct cremation service), if you use one, will be able to advise** you on the details of what needs to happen, assist you in completing relevant forms, and arrange for any other relevant documentation to be completed.
3. If you want to know more about the role of the funeral director in this process, you can find the cremation guidance for funeral directors here: www.gov.uk/government/collections/cremation-forms-and-guidance.
4. **The most important part of your role is to complete the relevant application form. You may wish to complete the application form while you are with your funeral service provider, if you use one, who will be able to support you through the process and answer any questions you may have.**

Death Certification Reform and the Medical Examiner system

5. A new statutory death certification process came into effect in England and Wales on 9 September 2024. Under this system, all deaths in England and Wales are independently scrutinised, either by a coroner¹ or – in cases not involving the coroner – by a Medical Examiner (ME). In certain cases, the death may have been sent to the coroner, but the coroner has decided that they do not need to investigate, so they will pass it to the ME.
6. The introduction of MEs through these reforms will improve the quality and accuracy of the information provided on the Medical Certificate of Cause of Death (MCCD), which is the document which provides a permanent legal record of the death and enables the bereaved to register a death and arrange a funeral.
7. The process under the new system:
 - When someone dies, the medical practitioner who attended them will – where they are able – propose a cause of death to the best of their knowledge and belief.
 - The attending medical practitioner will then share that proposed cause of death with the ME, a senior medical doctor, who will provide an independent scrutiny of the death. MEs will provide an opportunity for the bereaved to ask any questions and raise any concerns. Further information about the role of the ME is available at this link: [An overview of the death certification reforms - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/an-overview-of-the-death-certification-reforms)
 - **Once the ME has independently completed their scrutiny of the death and notified the registrar and the medical certificate is forwarded on for registration, you, as the representative of the deceased person, will be informed.** You will then be able to contact the registrar's office to register the death. Details on how to do this can be found here: [Register a death - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/transactions/register-a-death)
 - **Once you have registered the death**, the registrar will produce a Death Certificate for you to purchase, and they will also produce a Certificate for Burial or Cremation also known as 'the green form' to facilitate the funeral arrangements. The 'green form' is a document which is generated by the registrar with the information from the MCCD and is one of the documents that provides the crematorium with the authority to cremate. The green form must therefore be sent to the crematorium along with the application for cremation.

¹ Statutory provisions typically refer to 'senior coroner'. However there is also statutory provision for area and assistant coroners to exercise the powers and undertake the duties of a senior coroner. Therefore, for ease of reference, the generic term 'coroner' is used throughout this guidance.

If you have serious concerns about the cause of death

8. **If you have serious concerns about the cause of death and believe the case should be investigated by a coroner, you should contact the coroner's office right away.** A coroner is an independent judicial office holder appointed by a local authority to investigate deaths that are unnatural, violent or if the cause was unknown, or due to an industrial disease. In such cases, the death should have already been referred to a coroner by a doctor or by the police. However, if you are not sure whether this has happened, or if you are not sure whether coroner referral is required, you should discuss your concerns with the Medical Examiner, who can help obtain answers to any questions and advise on whether coroner referral is required. Your funeral service provider, if you use one, can also provide contact details and any other assistance.

Form Cremation 1 – Application for cremation of the body of a person who has died

9. Form Cremation 1 is also known as the “Application for cremation of the body of a person who has died”. This is the key form which you will be required to fill out. Your funeral service provider, if you choose to use one, should have copies of this form for you to complete. If they do not, or you are not using their services, you can find the form here: www.gov.uk/government/collections/cremation-forms-and-guidance.
10. Bilingual versions of the application forms and Welsh language versions of this guidance are available and can be found at: www.gov.uk/government/collections/ffurflenni-ac-arweiniad-ar-amlosgi.
11. There are four key parts of form Cremation 1 that are particularly important, and that we want to draw your attention to. These are:
- The applicant for the cremation is normally an executor or next of kin over the age of 16.
 - You must notify relevant authorities, such as the funeral service provider if using one or the crematorium, of the presence of any implantable medical devices (part 3 of the form, further explained in paragraphs 18 to 21 below).
 - You must provide instructions about what you would like to happen with the ashes following the cremation (part 4 of the form, further explained in paragraphs 22 to 29 below).
 - You must provide instructions about what you would like to happen with any metals following the cremation (part 4 of the form, further explained in paragraphs 30 and 31 below).
12. **All questions on the form must be answered and all parts of the form must be completed.** You will be asked to confirm that you have provided all relevant documentation in part 1. If you use a funeral service provider, they will be able to help you confirm this using the cremation guidance for funeral directors, which is available above via the link in paragraph 9.
13. Please note, if your contact details change after you have made the application for cremation, you must notify the crematorium. If you use a funeral service provider, you may be able to do this through them.

14. The applicant for a cremation should normally be a near relative or an executor. If you are not either of these, you should provide reasons in part 2 of the application form as to why you are making the application. You must also inform all near relatives and executors about the cremation wherever possible or provide an explanation as to why you cannot inform them. If any near relative objects to the cremation you must record this on the form. Please note that if there are objections to the cremation you may need to seek legal advice before the cremation can go ahead.
15. At the bottom of the form there is a **declaration that you must sign**. This is to confirm that you are the person who is applying for a cremation, certifying that:
- you are over the age of 16, and
 - that you believe that the facts that you have provided on the form are true.
16. This declaration must be signed before it is passed to the crematorium. If you are using a funeral service provider, they **must not complete and/or sign the form on your behalf**.
17. Please note that it is an offence to wilfully make a false statement to procure the cremation of human remains.

Implantable medical devices – Part 3

18. Certain implantable medical devices in the body can explode when cremated. This can cause damage to the machinery as well as present a risk to those operating the cremator.
19. Relevant implantable medical devices include, but are not limited to a pacemaker, a radioactive device, or a “Fixion” intramedullary nailing system. A “Fixion” intramedullary nailing system is made of stainless steel and may be used to treat fractures of the humerus and in the lower limbs. A non-exhaustive list of potentially dangerous implantable medical devices is contained at [Annex A](#).
20. As implantable medical devices can become a serious hazard during the cremation process, form Cremation 1 includes a question asking if the applicant knows if the deceased person has any implantable medical devices in their body which may become hazardous when the body is cremated.
21. As the applicant, you may not always know about any potentially hazardous implantable medical devices. The medical practitioner who certifies the death of the deceased person is also asked to provide any information that they have on their records relating to implantable medical devices which is added to the additional page of green form. **If you are aware of any potentially hazardous implantable medical devices, please include these on the application form.**

Ashes – Part 4

22. After a cremation, the ashes that remain will be removed from the cremator. Any metal that was in the body of the deceased person will also be removed and the ashes will be reduced to fine particles.
23. In some very rare circumstances, such as in the cremation of very small babies or of body parts, there is a risk that very little or no ash is recoverable following the cremation. Modern technology and improved practices have significantly reduced this risk, however if you have any questions or concerns about the ashes that will be recovered from the cremation, please raise these with your funeral service provider or crematorium. You may wish to consider alternatives to a cremation with your funeral service provider, if you chose one, or crematorium.
24. When you apply for a cremation, you will be asked about what you wish to happen to the ashes. These can be:
- Option 1: **scattered / interred / or otherwise dealt with by the crematorium** who may have other memorial options available, or
 - Option 2: **ashes to be collected from the crematorium** either by you or a person nominated by you, including your funeral service provider if you use one.
 - Option 3: **ashes to be held awaiting your decision.**
25. The crematorium or your funeral service provider, if you use one, will be able to confirm what services are available – and you will then need to note your instructions on the application form.
26. If you are not sure yet what you want to do with the ashes, you may choose Option 3: 'Ashes to be held awaiting your decision'. **When choosing this option, you should indicate a date or period of time by which you will have decided what should happen to the ashes. Please note that the crematorium will not hold on to them indefinitely. You need to be aware that the crematorium may introduce a charge for holding the ashes after a certain period.** The crematorium, or your funeral service provider if you are using one, can provide further information.
27. If you wish to change or provide further instructions (e.g. if you were unsure, at the time of filling in the application, what you wanted to happen to the ashes) you should contact the crematorium that conducted the cremation as soon as possible. You will be asked to confirm your new instructions in writing.
28. If you do not collect the ashes, the crematorium will contact you and give you 14 days' notice of their intentions of either burying or scattering the ashes at the crematorium or burial ground. This will only happen if the ashes are not collected as instructed or no instructions are provided. If, on receiving a notice from the cremation authority that they

intend to bury or scatter the ashes, you decide that you do not wish for this to happen, you will need to provide alternative written instructions, either directly to the crematorium or through your funeral service provider if you are using one. The written instructions would need to be received by the crematorium before the expiry of the 14-day notice period and must indicate a new date by which the ashes will be collected.

29. Please note that if you change your contact details after the cremation but before your instructions for the ashes have been carried out, you must inform the crematorium of your new contact details.

Disposal of metals – Part 4

30. During their lifetime, the deceased person may have had an operation e.g. to replace a joint or have metal inserted to assist with the repair of a bone. Once cremated, any of the metal remains, together with those from the construction of the coffin, will remain in the ashes following the cremation. **You will need to decide what you want to happen to this metal after the cremation.**
31. If you have the right and would like any metal returned, you will need to tick the relevant box. In general, surgical implants usually become the property of the person into whom it has been implanted, and forms part of their estate on death unless there is specific provision to the contrary. Therefore, beneficiaries of the deceased person's estate will usually have the right to claim these implants. **Otherwise, or if the individual wishes the crematoria to do so, metals may be recycled by the crematorium.** If, however, you change your mind after receiving the metal residues, you should contact the crematorium about the metals being recycled. Each crematorium will have their own practices and will be able to advise you on what their processes are.

Form Cremation 2 – Application for cremation of body parts

32. Form Cremation 2 is also known as the “Application for cremation of body parts”. This is the form which you will be required to fill out if you are applying for a cremation of body parts.
33. Your funeral service provider, if you choose to use one, should have either hard or digital copies of this form for you to complete. If they do not, you can find the form here: www.gov.uk/government/collections/cremation-forms-and-guidance.
34. Bilingual versions of the application forms and Welsh language versions of this guidance are available and can be found at: www.gov.uk/government/collections/ffurflenni-ac-arweiniad-ar-amlosgi.
35. **Please see paragraphs 22 – 29 for information about any ashes produced as a result of the cremation.**

Form Cremation 3 – Application for cremation of a stillborn baby

36. Form Cremation 3 is also known as the “Application for cremation of a stillborn baby”. A stillbirth occurs when a baby is born not alive after 24 completed weeks of pregnancy. If less than 24 weeks have passed, the 2008 regulations do not apply, though the crematorium may still facilitate the cremation.
37. Form Cremation 3 must be completed and signed by the applicant, who will usually be the parents, though the form may be completed by the bereavement officer at the hospital if requested by the parents. Bilingual versions of the application forms and Welsh language versions of this guidance are available and can be found at: www.gov.uk/government/collections/ffurflenni-ac-arweiniad-ar-amlosgi.
38. **Please see paragraphs 22 – 29 for information about any ashes produced as a result of the cremation.**

Further Information

39. This guidance is not exhaustive. If you have any further queries or need further information about the 2008 regulations, please contact the Funeral Sector, Burials and Cremation Policy team at the Ministry of Justice at FuneralSectorBurialsandCremation@justice.gov.uk.

Annex A – Battery powered and other implantable medical devices that could cause problems during cremation

Implants that could cause issues during a cremation include but are not limited to:

- Pacemakers
- Implantable Cardioverter Defibrillators (ICDs)
- Cardiac resynchronization therapy devices (CRTDs)
- Implantable loop recorders
- Ventricular assist devices (VADs): Left ventricular assist devices (LVADs), Right ventricular assist devices (RVADs), or Biventricular assist devices BiVADs)
- Implantable drug pumps including intrathecal pumps
- Neurostimulators (including for pain & Functional Electrical Stimulation)
- Bone growth stimulators
- Fixion nails
- Any other battery powered or pressurised implant
- Radioactive implants used to treat tumours, such as metal wires, seeds or tubes.
- Radiopharmaceutical treatment (via injection)



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