



The Cemeteries Act
Crematorium Compliance Report

Inspection date: _____ Inspection Type: Routine Follow-up Complaint

Licence #: _____ Contact #: _____

Owner: _____ Business/Legal Name: _____

DBA: _____ Address: _____

1. Is there a license for the maintenance and operation of a crematorium? [Section #2]

 I A

2. Does the owner/operator maintain a register of bodies cremated? [Section 6(1)]

 I A

3. Does the register include the name and last address of the deceased? [Section 6(1) (a)]

 I A

4. Does the register include the date of death? [Section 6(1) (b)]

 I A

5. Does the register include the name of the medical practitioner giving the medical certificate of death? [Section 6(1)(c)]

 I A

6. Does the register include the place of death? [Section 6(1)(d)]

 I A

7. Does the register include the date of cremation if cremated? [Section 6(1) (e)]

 I A

I

Incomplete

A

Acceptable

N/A – Not applicable

8. Does the register include the date of disposition if body was not cremated? [Section 6(1)(f)]

I

A

9. Does the register include the name and address of the next-of-kin of the deceased?
[Section 6(1)(g)]

I

A

10. Does the register include the name and address of the person making the arrangements?
[Section 6(1)(h)]

I

A

11. Does the register include the disposition of the remaining cremated remains? [Section 6(1)(i)]

I

A

12. Does the register include the fees charged for the services rendered? [Section 6(1)(j)]

I

A

13. Visual inspection – is the crematory being maintained and operated in conformity with the
Act and regulations? [Section 20(2)(a)]

I

A

14. Has the crematory or its operation been altered or varied? [Section 5(a) and (b) Regulation]

I

A

Inspector's signature

Signature of Crematorium
representative