



This document can be completed and emailed back or faxed to 905-272-9723
E mail Tranquility: info@tranquilitycremation.com

Full name of Deceased: _____

Address of Deceased: _____

Date of Birth: _____

Place of Birth: _____

Social Insurance Number: _____

Marital status: _____

Last name and given names of spouse: _____

Occupation (if retired when working last): _____

Father's name: _____

Father's place of birth: _____

Mother's name (Maiden name as well): _____

Mother's place of birth: _____

Name of next of kin and relationship: _____

Address & phone number for next of kin: _____

Does the deceased have a will: _____

Please state name & contact information for executor if different from next of kin:

Office Hours Monday-Friday 9-5 after hours and Holidays by appointment only: call 905-855-7565