

## Designating A Funeral Representative

Michigan law allows an individual 18 years and older, and of sound mind, to designate a person to make decisions about funeral arrangements and the final disposition of their body after their death. The person designated is known as a "funeral representative." If you choose not to designate a funeral representative, the right to make these decisions will most likely belong to your closest next-of-kin.

**How do I designate a funeral representative?** The designation must be in writing, dated, and signed by you in the presence of a notary public and two witnesses. If you are physically unable to sign, the notary may do so for you indicating that "the signature is affixed pursuant to section 33 of the Michigan notary public act."

**Whom may I designate as my funeral representative?** The person you appoint must be at least 18 years and of sound mind. However, the following people may not be designated unless they are one of your relatives: (1) a person who is an officer, partner, member, shareholder, owner, representative, or employee of a funeral home or crematory that will be providing services after you die, or a cemetery where your body will be buried, entombed, or where your ashes will be inurned; and (2) a health professional or an employee or volunteer at a health facility that provides care during your final illness or immediately before death, or a partner, member, shareholder, owner, or representative of that health facility.

**Who may be a witness?** A witness should be an adult but may not be the person being designated as the funeral representative or any of the people who are prohibited from serving as a funeral representative, except that a person connected with a funeral home may serve as a witness.

**Must my funeral representative follow my instructions?** In most cases, the funeral representative will follow the instructions of the person who appointed him or her. However, circumstances can change and, therefore, the law vests final responsibility for these decisions in the funeral representative.

**What happens if my funeral representative is not available when I die?** It is a good idea to appoint a successor funeral representative in case the first person appointed is not available or declines to act. This can be done at the same time and in the same document as the first appointment.

**May the person I designate decline to serve after I die?** The person designated as funeral representative must accept the designation either by signing an acceptance — which can be done in the same document as the designation of the person -- or by acting as the funeral representative after the death. The preferable practice is to have the designee sign the acceptance in advance. A funeral representative may also resign from the position.

**Can my funeral representative make the arrangements before I die?** No.

**May I revoke my designation of a funeral representative?** The designation may be revoked prior to death in writing following the same requirements as the original designation. It may also be revoked by the subsequent designation of a different person as funeral representative. The designation is automatically revoked after death if the funeral representative refuses to act or cannot be located.

**FUNERAL REPRESENTATIVE DESIGNATION**

I, \_\_\_\_\_, being 18 years or older and of sound mind, voluntarily make  
(Print or type your full name)

this designation.

The person I choose as my funeral representative is:

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Street Address, City, State, and Zip Code \_\_\_\_\_

If my first choice cannot serve or be located, the person who is my second choice or my "successor funeral representative" is:

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Street Address, City, State, and Zip Code \_\_\_\_\_

**The person I have designated as my funeral representative shall have the right and power to make decisions about my funeral arrangements and the handling, disposition, or disinterment of my body, including decisions about cremation. This designation shall revoke any prior funeral representative designation(s) I have made.**

**SIGNATURE**

I sign this document voluntarily, and I understand its purpose.

\_\_\_\_\_  
Date Your signature Date of Birth

\_\_\_\_\_  
Your Telephone Your address (Street Address, City, State and Zip Code)

The foregoing instrument was acknowledged before me on \_\_\_\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
Notary Public, \_\_\_\_\_ County, \_\_\_\_\_  
Acting in \_\_\_\_\_ County,  
My Commission Expires:

Check here if, because of a physical disability, my signature has been affixed by a notary public pursuant to section 33 of the Michigan Notary Public Act.

**STATEMENT AND SIGNATURE OF WITNESSES**

I have chosen two adult witnesses who are not my designated funeral representative or (1) a person who is an officer, partner, member, shareholder, owner, representative, or employee of a crematory that will be providing services after I die, or a cemetery where my body will be buried, entombed, or where my ashes will be inurned; or (2) a health professional or an employee or volunteer at a health facility that provides care during my last illness or immediately before death, or a partner, member, shareholder, owner, or representative of that health facility.

This declaration was signed in our presence. The declarant appears to be of sound mind and under no duress, fraud, or undue influence. **Sign below and print your name below the line.**

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Address (Street Address, City, State and Zip Code)

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Address (Street Address, City, State and Zip Code)

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**ACCEPTANCE BY FUNERAL REPRESENTATIVE**

I, \_\_\_\_\_, accept the designation as funeral representative for  
(Name of funeral representative)

\_\_\_\_\_  
(Name)

Signed: \_\_\_\_\_ Date \_\_\_\_\_  
Signature of funeral representative

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**ACCEPTANCE BY SUCCESSOR FUNERAL REPRESENTATIVE**

I, \_\_\_\_\_, accept the designation as funeral representative for  
(Name of funeral representative)

\_\_\_\_\_  
(Name)

Signed: \_\_\_\_\_ Date \_\_\_\_\_  
Signature of successor funeral representative