



**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
BUREAU OF HEALTH PROTECTION AND PREPAREDNESS**

Office of Vital Records and Statistics  
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**BURIAL TRANSIT PERMIT**

***(Instructions on the Back)***

<b>SECTION I: PERSONAL DATA ON DECEDENT</b>		Name of Decedent			Date of Death	
City, Town or Location of Death		Social Security Number		Sex	Race	Age
Death Due to Communicable Disease? Yes <input type="checkbox"/> No <input type="checkbox"/>		Residence at Time of Death		City	State	ZIP
<b>MANNER AND PLACE OF DISPOSITION</b>				<b>LOCATION OF DISPOSITION</b>		
Method of Disposal: Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal <input type="checkbox"/> Other (specify) <input type="checkbox"/>				Name of Cemetery or Crematory		
_____				Street Address		
_____				County		
_____				City or Township		State ZIP
<b>CAUSE OF DEATH</b>						
<b>PERSON ACTING AS FUNERAL DIRECTOR</b>						
Signature		Date		License #		Address

<b>SECTION II: AUTHORIZATION TO DISPOSE OF BODY</b>		
Per NRS 440.510, a satisfactory certificate of death has been filed as required by law, permission is granted to inter or otherwise dispose of the body of the deceased.		
Signature of Local Registrar		Date

<b>SECTION III: DISPOSITION OF BODY</b>			
Body was	_____	_____	
<input type="checkbox"/> Buried	Date of Disposition	Name of Cemetery or Crematory	
<input type="checkbox"/> Cremated	_____	_____	
<input type="checkbox"/> Other (Specify)	Street Address	County	
_____	City or Township	State	ZIP
_____	Sexton (or Person in Charge) Signature		Date
<p><b>Per NRS 440.580, Each sexton or person in charge of any burial ground shall endorse upon the permit the date of interment, over his or her signature, and shall return all permits so endorsed to the local health officer of his or her district within <b>ten (10)</b> days from the date of interment.</b></p> <p><b>Please make two copies of this form and distribute as follows:</b></p> <ul style="list-style-type: none"> <li>• A copy goes to the funeral home or originating source</li> <li>• The original accompanies the body and is delivered to the Sexton or person in charge</li> <li>• A copy is returned to the Registrar authorizing the disposition</li> </ul>			

## **Instructions:**

### **General Process Flow**

1. The Funeral Home fills out all parts of Section 1, signs and dates the form
2. Mail, fax or deliver the permit to your Local or State Registrar
3. The Registrar will review the permit
4. If there are no issues,
  - a. the Registrar will sign and date the Authorization to Dispose of Body section
  - b. the Registrar will make two copies of the signed permit (one for the registrar's records and one for the funeral home)
5. Funeral Home is to keep a copy for their records
6. A copy of the completed burial permit must accompany the body
7. Once disposition has occurred, the permit shall be signed by the Sexton or person in charge, the following entities need a completed copy:
  - a. The Cemetery or Crematorium will keep the original (whoever the body was delivered to keeps the original)
  - b. Authorizing Registrar (Registrar authorizing the permit)
  - c. Funeral Home

### **Permit Form Instructions**

#### **Section 1: Decedent's Personal Data & Status of Disposition (Funeral Home's Section)**

1. Fill out the Personal Data on the Decedent
2. Fill out Manner and Place of Disposition information
3. Fill out Location of Disposition information
4. Fill out Cause of Death (can list up to 4 causes)
5. Person Acting as Funeral Director is to provide:
  - a. Signature
  - b. Date signed
  - c. License #
  - d. Location
6. Mail, fax or deliver the permit to your Local Registrar

#### **Section 2: Authorization to Dispose of Body (State's Section)**

1. Registrar will review the permit
2. If complete, the Registrar will sign the permit
3. The Registrar will make two copies of the signed permit – one for the Registrar/one for the Funeral Home
4. The original documentation will be returned
5. The Funeral Home is to keep a copy of the signed permit for their records
6. The original must accompany the body

#### **Section 3: Disposition of Body (Sexton's Section)**

Sexton or Person in Charge is to fill out the following information:

1. Check the box designating what happened to the body
2. Fill out Cemetery or Crematory's Information
3. Sign and Date
4. The Sexton or Person in charge has 10 days from the date of interment to return a fully signed copy with all signatures to the authorizing Registrar

Once the permit has been signed by the Sexton or person in charge, the following entities need a copy:

- The Cemetery or Crematorium will keep the original
- A copy is to be mailed to the Registrar authorizing the permit
- A copy is to be mailed to the Funeral Home

If you have any questions, please feel free to contact the Office of Vital Records and Statistics at (775) 684-4166.