



## VSD-003 - REQUEST FOR DISINTERMENT INSTRUCTIONS

Please complete this Request for Disinterment, as instructed below, and return to the state cemetery. This form, when properly completed, notarized and affixed with a Notary Public's official seal, constitutes a valid affidavit for requesting a disinterment. Your Request for Disinterment will be reviewed for completeness and compliance and you will be notified of approval of the disinterment. If you have any questions or require further assistance please do not hesitate to contact a state veterans cemetery.

### *12 CCR § 464. Disinterments*

*(a) Interments of eligible decedents in state veterans cemeteries are considered permanent and final. Disinterment will be permitted only for cogent reasons and with the prior written authorization of the Cemetery Director responsible for the cemetery involved. Disinterment from a state veterans cemetery will be approved only when all living immediate family members of the decedent, and the person who initiated the interment (whether or not he or she is a member of the immediate family), give their written consent, or when a court order or State instrumentality of competent jurisdiction directs the disinterment. For purposes of this section, "immediate family members" are defined as surviving spouse, whether or not he or she is remarried; all adult children of the decedent; the appointed guardian(s) of minor children; and the appointed guardian(s) of the surviving spouse or of the adult child(ren) of the decedent. If the surviving spouse and all of the children of the decedent are deceased, the decedent's parents will be considered "immediate family members."*

*(b) Requests for disinterment must be submitted on Form VSD-003, Request for Disinterment (dated February 2016), which is hereby incorporated by reference in its entirety, and will include the following information:*

- (1) A full statement of reasons for the proposed disinterment.*
- (2) Notarized statement(s) by all living immediate family members of the decedent, and the person who initiated the interment (whether or not he or she is a member of the immediate family), that they consent to the proposed disinterment.*
- (3) A notarized statement, by the person requesting the disinterment that those who supplied affidavits comprise all the living immediate family members of the deceased.*

*(c) In lieu of the documents required in paragraph (b) of this section, an order of a court of competent jurisdiction will be considered.*

*(d) Any disinterment that may be authorized under this section must be accomplished without expense to the State.*

*(e) The state veterans cemetery shall charge a disinterment fee for an in-ground cremation that is equivalent to 50% of the current federal burial reimbursement rate, and a disinterment for caskets that is equivalent to 75% of the current federal burial reimbursement rate. The state veterans cemetery may not charge a disinterment fee for the reopening of a niche.*

*Note: Authority cited: Military and Veterans Code: Section 1455. References: Military and Veterans Code: Sections 1400, 1410, 1455.*



**VSD-003 – DISINTERMENT AFFIDAVIT**

**PRIVACY ACT NOTICE:** The information requested is required to authorize disinterment of remains from a California State Veterans Cemetery as required under Chapter 24, Title 38, United States Code. The information may be disclosed outside VA as permitted by law, or as stated in the “Notices of Systems of VA Records” which have been published in the Federal Register in accordance with the Privacy Act of 1974. The disinterment will not be permitted unless the data or a court order is submitted.

**RESPONDENT BURDEN:** Public reporting burden for this collection of information is estimated to average ten minutes per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed completing and reviewing the collection information. This form, when completed in accordance with VA disinterment regulations, will permit CalVet to authorize disinterment.

**TO WHOM IT MAY CONCERN:**

I (we) the undersigned hereby signify my (our) Agreement for the disinterment of the remains of \_\_\_\_\_

from \_\_\_\_\_. (Enter name of cemetery)

*NOTE: The person who originally requested the interment at the state veterans cemetery must sign page 1 or 2 to acknowledge the disinterment.*

SIGNATURE	RELATIONSHIP TO DECEASED	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

[SEAL] \_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_