

PAUPER BURIAL POLICY

1 Statutory Authority

- 1.1 Bosque County is authorized under TEXAS HEALTH AND SAFETY CODE, Section 694.002, TEXAS LOCAL GOVERNMENT CODE, Section 81.027, and other applicable statutes, to provide for cremation of indigent persons in Bosque County.
- 1.2 Under Section 711.002(a), Texas Health and Safety Code, the following persons, in the priority listed, have the duty to bury or cremate a decedent's remains, and are liable for the cost of cremation:
 - (1) The person designated in a written instrument signed by the decedent;
 - (2) The decedent's surviving spouse;
 - (3) Any and all of the decedent's surviving adult children;
 - (4) Either and all of the decedent's surviving parents;
 - (5) Any and all of the decedent's surviving adult siblings; or
 - (6) Any adult person in the next degree of kinship in the order named by law to inherit the estate of the decedent.
- 1.3 Pursuant to Section 711.002(d) and (e), the county in which the death occurred is responsible for the cost of cremation only if there is no person with a higher priority of responsibility.
- 1.4 Pauper burials may be provided for eligible Bosque County decedents lacking the income or resources to afford cremation expense and who meet applicable eligibility requirements under this Policy. All pauper cremation applications must provide required documentation to prove eligibility.

2 Eligibility Requirements/Investigation of Resources

- 2.1 A person whose death occurs in Bosque County may be certified as a pauper eligible for burial by the County under this policy if the County Judge determines, after reasonable investigation, that:
- 2.2 Bosque County requires that anyone requesting indigent burial assistance first contact a Funeral Home of their choice and attempt to make financial arrangements using their own or the decedent's resources. The legal Next of Kin **MUST** meet in person (or via fax, if out of town or if there are extenuating circumstances), with the Funeral Home to try to arrange a lower cost/most economical funeral arrangement. If there are insufficient resources available to pay the cost of cremation, the Funeral Home will refer the individual to the Bosque County Judge.

- 2.3 If the County denies assistance to application made by a legal Next of Kin, another application for assistance made by another legal Next of Kin, to the County will not be accepted.
- 2.4 Before making a referral to the County for determination of pauper status, the legal next of kin must first attempt to investigate the resources available to the decedent's estate or family members for the cost of cremation. This investigation must include determining if the decedent is eligible for cremation benefits from the other sources, including:
- (1) Veteran's Administration
 - (2) Social Security Administration
 - (3) Private Insurance Companies
- 2.5 Should the deceased be eligible for benefits from Social Security or Veterans Administration, those benefits must be paid to Bosque County up to the \$1,000.00 allowed expense, any above that will be paid to the family.
- 2.6 The family of the deceased must show proof to the County of Bosque that there are no resources available to them to be eligible to have the \$1,000.00 funeral expense allowance paid to the funeral home.

3 Location of Next of Kin

- 3.1 Pursuant to applicable law, the person or entity with possession of the body of the Decedent must make a reasonable effort to find the Next of Kin. Documentation of any such efforts made prior to referral to County shall be provided to County. It is expected that family, friends and the Funeral Home will make an effort to determine the Next of Kin and notify County of their findings.
- 3.2 Bosque County will make a good faith effort to identify and contact the Next of Kin based on available information if necessary and if an autopsy is required.
- 3.3 If a Next of Kin is located and upon referral by a funeral home, a statement from a legal Next of Kin will be required with each completed application. Such statement shall include the following:
- A. Name of legal Next of Kin and Relationship to decedent
 - B. Date
 - C. Name of Decedent
 - D. Address
 - E. Statement of permission by the Next of Kin for the County to cremate the decedent contained in a signed affidavit identifying the affiant as the Next of Kin, waiving all rights to inter the remains and indemnifying the County against any claims related to the cremation.
 - F. Consent to execute any additional forms required by the county for cremation.

4 No Next of Kin Referral

- 4.1 If the legal Next of Kin does not begin or complete the application process within ninety-six hours after notification of death by the funeral home, Medical Examiner or County, or if no Next of Kin is available, the County will cremate the remains of an eligible Decedent as a "No Next of Kin" referral.
- 4.2 When no Next of Kin can be identified to apply on the Decedent's behalf, the referral from the Funeral Home will be considered a No Next of Kin referral. Funeral Homes will provide as much information as possible on the Decedent for the County to complete an inquiry into locating the Next of Kin.
- 4.3 The County will not provide any information for No Next of Kin Referrals regarding inquiries for services for the Decedent. The Funeral Home may give out information per their policies.
- 4.4 If a no Next of Kin referral begins, and Next of Kin is located prior to cremation, the Funeral Home or medical examiner's office must contact the County Judge immediately for the Next of Kin to take possession of the Decedent or to apply to the County for burial assistance if qualified by application.
- 4.5 If a body is abandoned by the Next of Kin or no Next of Kin is identified, the County will proceed pursuant to applicable law with cremation at the discretion of the County.

5 Cremation Expenses Provided

- 5.1 In no event will the County provide cremation financial assistance in excess of \$1,000.00. The County shall be the sole authority regarding its responsibility for disposition of the decedent's remains as authorized herein.
- 5.2 Bosque County will not provide viewing of the Decedent's body.
- 5.3 Bosque County will not provide a visitation service.
- 5.4 The allowed funeral expense fee does not include any death certificates nor any other item that the family may request not listed under the cost for cremation.



6 Limitations

- 6.1 No approval of assistance prior to death will be considered.
- 6.2 Family (including Applicant and any legal Next of Kin) may not pay for additional services, i.e. urn, marker, etc.
- 6.3 Permanent markers or headstones will not be allowed unless the County is first reimbursed for all expenses associated with cremation.

- 6.4 Pursuant to Section 694.002 of the Texas Health and Safety Code, if Bosque County discovers cash in the possession of a deceased pauper, the County may use the cash to pay for the actual costs incurred by the County in disposing of the pauper's body. If any cash remains after the county has paid the costs of disposing the body, the County shall place the cash in a trust. A person having a claim to the money in trust must exercise the right to collect the money not later than the first anniversary of the date of the disposition of the pauper's body.
- 6.5 If the County determines that a pauper's estate or family have resources to pay a portion but not all of the cremation expenses, a contribution towards the expense **must** be made by the family to the funeral home and deducted from the bill submitted to the county from the funeral home.
- 6.6 For Bosque County to pay for immediate disposal by cremation there will be no variation from the guidelines that have been listed. The chosen funeral home must show to the county that the chosen form of disposal was carried out as per the guidelines. Any variation from those guidelines will be cause to to pay the chosen funeral home for the services.
- 6.7 Should it be found that at the time of the death of the deceased, funds were available to pay for the cost of the normal funeral home charge for immediate disposal by cremation, this will be grounds for legal prosecution by fraud.

PASSED AND ADOPTED by the Board of County Commissioners of Bosque County, Texas this 17th day of October, 2022


Cindy Vanlandingham
County Judge



ATTEST
Tabatha Ferguson
County Clerk

APPLICATION FOR INDIGENT CREMATION

Information on Decedent:

Name:

Last, First, Middle Date of Birth Date of Death

Address

Street Address City State Zip

Occupation How long?

Marital Status _____ Spouse's Occupation _____

Income:

Decedent \$ _____ per _____ Spouse \$ _____ per _____

Did the Decedent receive:	AFDC	Yes No	How Much	\$ _____
	Unemployment	Yes No	How Much	\$ _____
	Disability or Worker Comp	Yes No	How Much	\$ _____
	Retirement	Yes No	How Much	\$ _____
	Social Security	Yes No	How Much	\$ _____
	SNAP (Food Stamps)	Yes No	How Much	\$ _____
	Veterans Benefits	Yes No	How Much	\$ _____

Did the Deceased have children: Yes No If yes, how many? _____

Children Names and contact information:

Was Decedent a Veteran? Yes No / Branch of Service _____ Served from _____ to _____

Has the VA been contacted for burial assistance? Yes No

Explain: (If yes, what was their response – If no, explain why) _____

Residence:

- Rent, if so, amount of monthly rental payment is \$ _____.
- Own, value of home \$ _____.
- Buying, if so, amount of monthly mortgage payment is \$ _____.
- Other, please explain: _____

List all vehicles which decedent owned, rented or leased.

1.

Model	Make	Approximate appraised value	Mileage
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2.

Model	Make	Approximate appraised value	Mileage
-------	------	-----------------------------	---------
3.

Model	Make	Approximate appraised value	Mileage
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List any and all boats, campers, trailers, stereos, televisions, telephones, furniture, and any other items which decedent possessed that has an individual value over \$100.

ITEM	VALUE	ITEM	VALUE

List any bank accounts (checking, savings, etc.) with account numbers and current balance (Provide last 3 statements):

List any life insurance policy or Burial Policy

List any real estate which decedent owned, rented, or leased:

List any security such as bonds, stocks, etc. (Provide last 3 statements):

Did the deceased designate in writing a person to manage the details of burial or cremation? _____
 If so, provide the designation document along with the person's name and contact information.

Information on Applicant:

Name, Last, First, Middle Date of Birth

Relationship to decedent: Telephone Number

Mailing Address City State Zip

Street Address City State Zip

Number of Dependent individuals in household (List name, relation and age):

Applicant Occupation How long?

Marital Status Spouse's Occupation

Income:

Applicant \$ per Spouse \$ per

Does the Applicant receive:	AFDC	Yes No	How Much	\$
	Unemployment	Yes No	How Much	\$
	Disability or Worker Comp	Yes No	How Much	\$
	Retirement	Yes No	How Much	\$
	Social Security	Yes No	How Much	\$
	SNAP (Food Stamps)	Yes No	How Much	\$
	Veterans Benefits	Yes No	How Much	\$

Residence:

Rent, if so, amount of monthly rental payment is \$
Own
Buying, if so, amount of monthly mortgage payment is \$
Other, please explain:

List all vehicles which you own, rent, or lease.

- Model Make Approximate appraised value Mileage
- Model Make Approximate appraised value Mileage
- Model Make Approximate appraised value Mileage

List any and all boats, campers, trailers, stereos, televisions, and any other items which decedent possessed that has an individual value over \$100.

ITEM	VALUE	ITEM	VALUE

List any bank accounts (checking, savings, etc.) with account numbers and current balance (Provide last 3 statements):

_____	_____
_____	_____
_____	_____

List any real estate which decedent owned, rented, or leased:

_____	_____
_____	_____

List any security such as bonds, stocks, etc. (Provide last 3 statements):

_____	_____
_____	_____

The following items must be received in the office of the **BOSQUE COUNTY JUDGE** during normal business hours within 3 business days of turning in this application in order for the application to be considered for indigent services; otherwise the application will be denied.

Once all information is received, please allow 5 business days to process the application.

1. Current Texas Driver's License or ID card with current address for applicant and deceased.
2. 2 pieces of mail showing current address of applicant and deceased.
3. Copy of Social Security Card of applicant and deceased.
4. Applicants most recent tax return.
5. Current tax return of deceased.
6. Most recent pay stubs (for past 3 months) for applicant and any member of the household.
7. If you are self-employed, provide tax returns for the last 2 years.
8. If you receive assistance via food stamps, please provide a current food stamp letter showing time period and amount received for applicant household and deceased.
9. All verification paperwork for SSdi, SSI, TANF, Social Security & Unemployment of monthly payments for applicant household and deceased.
10. All verification paperwork for any other financial assistance programs for applicant household and deceased.
11. Last Will and Testament of the deceased.
12. Any prepaid burial insurance or funeral plan of deceased.
13. Life insurance policy of deceased
14. Bank Statements (for the last 3 months) for applicant household and deceased.

APPLICANT WARRANTS AND REPRESENTS THAT:

1. He/She is legally and duly authorized to make this application;
2. He/She has the superior authority over all other surviving relatives to make cremation arrangements for this body;
3. He/She understands that cremation of the body will be by and through a funeral home designated by the County.
4. He/She affirms the Decedent was a resident of Bosque County.
5. All information contained herein is accurate and truthful.

APPLICANT REQUESTS AND AUTHORIZES THE COUNTY TO CREMATE THE BODY OF THE DECEDENT WITHOUT FURTHER NOTICE TO THE APPLICANT.

APPLICANT AGREES THAT THIS APPLICATION MAY NOT BE WITHDRAWN OR MODIFIED EXCEPT IN WRITING.

On this _____ day of _____, 20____, I, the above named Applicant, have read and understand Bosque County's Policy for Cremation for a Pauper. I have read or have had read to me the above questionnaire and completed said questionnaire, and state under oath that each statement made herein is true. **I acknowledge that I am liable for prosecution for fraud, if any part of this application is in any way found to be false. I hereby swear under penalty of perjury under the laws of the State of Texas that the foregoing is true and correct. There are no resources to provide for cremation for the Deceased.**

APPLICANT PRINTED NAME

APPLICANT SIGNATURE

STATE OF TEXAS §

COUNTY OF BOSQUE §

Before me, on this day personally appeared _____ identified by _____ to be the person whose name is subscribed to the foregoing document and, being by me first duly sworn, declared that the statements therein contained are true and correct.

Notary Public, State of Texas

IN THE MATTER OF

§

IN THE COUNTY COURT

§

OF

§

BOSQUE, TEXAS

_____, DECEASED

PAUPER'S OATH

NOW COMES _____, Petitioner, in the above styled cause, and makes his/her Affidavit to the Court, the he/she is without and cannot obtain the money to pay the cost of the funeral expenses of _____, and that accordingly, his/her cause be commenced upon this, his/her Affidavit, and respectfully request that the County of Bosque pay \$1,000.00; that amount being the total expense of the cremation, to be conducted by, _____ Funeral Home, _____, Bosque County, Texas.

Petitioner's Signature

STATE OF TEXAS

COUNTY OF BOSQUE

BEFORE ME, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument by _____, and acknowledged to me that he/she executed the same for the purposes and considerations therein expressed.

Given under my hand and seal of office this _____ day of _____, 20_____.

Notary Public, Bosque County, Texas



Proof Verification Documents for Deceased Pauper

Date: _____

Eligible?

Bosque County Pauper Cremation is provided to the Indigent. Individuals with countable income equal to or less than 21% of the federal poverty level (FPL).

HHS POVERTY GUIDELINES FOR 2019

The 2019 poverty guidelines are in effect as of January 11, 2019.
The [Federal Register notice for the 2019 Poverty Guidelines](#) was published February 1, 2019.

2019 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
PERSONS IN FAMILY/HOUSEHOLD	POVERTY GUIDELINE
For families/households with more than 8 persons, add \$4,420 for each additional person.	
1	\$12,490
2	\$16,910
3	\$21,330
4	\$25,750
5	\$30,170
6	\$34,590
7	\$39,010
8	\$43,430

As of 12/19/2019 the above excerpt (<https://aspe.hhs.gov/poverty-guidelines>) applying the 21% followed by the Bosque County indigent Health Care rules would be an annual income of less than \$2,622.90, broken down by twelve months would equal to \$218.58 per month.

Proof: Please provide the following items to allow proof to be verified for Indigent services.

Driver's License or state issued ID card, and SSA-1099 social Security Administration, Bank Statement from any active bank accounts for deceased and responsible party for decedent. Household income including be not limited to (be sure to include government checks, money from training or work, money you collect from charging room and board, cash gifts, loans, or contributions from parents, relatives, friends, and others; sponsor's income; school grants or loans, etc.), please provide check stubs or other related documents.

I, _____, do solemnly swear that all of the information contained and provided in the proof verification process is true and correct, and I understand and acknowledge that giving false information or documentation may be grounds for refusal or termination of eligibility and be punishable under the Texas Penal Code.

Signature: _____ Printed Name: _____