Funeral Benefits
Request for an Exceptional Amount

The information provided on this form will be used to issue funeral benefits provided under Seniors, Community and Social Services. Collection, use and disclosure of your information is authorized under the authority of the Income and Employment Supports Act and the Assured Income for the Severely Handicapped Act and is managed in accordance with the Freedom of Information and Protection of Privacy Act. If you have questions about the collection, use or disclosure of your personal information, please contact the Alberta Supports Contact Centre at 1-877-644-9992 (toll-free) or 780-644-9992 (Edmonton).

Instructions
This form is used to request funds in excess of the maximum funeral benefit rates, in extraordinary circumstances. It can be completed either with a funeral benefits application, if all the required information is available, or after approval for a funeral benefit has been obtained and arrangements are finalized.

Please ensure all fields of this form are completed and that it is signed by the applicant.

Questions
If there are questions about completing this form, please call 780-638-4443 in Edmonton or toll free at 1-855-638-4443.

Section 1 - Applicant and deceased individual’s information

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<th>Reference number (if known)</th>
<th>Name of deceased</th>
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<th>Name of applicant</th>
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Section 2 – Criteria for exceeding the funeral benefits rate

Approval to exceed the maximum funeral benefit rates may be granted when there are extraordinary circumstances. Requests are reviewed by a senior staff member of the Health and Funeral Benefits unit.

- A request for an exceptional benefit amount is not appealable to an Appeal Panel.

The following criteria are considered for exception requests:

- the burial/cremation and funeral expenses cannot be met by the maximum rate due to extraordinary circumstances;
- the expenses are considered necessary and essential for cremation/burial and funeral services;
- there are no other means to pay, and
- the least cost alternative is considered.

Please note: where cemetery costs related to the burial of remains exceed $2,120, and the total amount requested exceeds the maximum benefit amount of $6,360, the additional cemetery costs above $2,120 will be paid as an exception. For this exception, completion of this form is not required as it will be based on the invoices submitted. This exemption applies to a single cemetery plot, cemetery perpetual fees, grave opening and closing fees (plus winter fee), and a grave liner.
Section 3 – Details supporting the request to exceed the maximum funeral benefits rate

Reason a higher benefit amount is being requested as an exception (please select one):
☐ additional costs due to health and/or safety reasons
☐ a reasonable amount for an honorarium (for a religious, cultural or spiritual leader
☐ other extraordinary circumstances

Please explain why additional funds are necessary and essential above the maximum benefit amount
Also, include how you have considered least cost alternatives for the whole funeral package. (If additional space is required, please attach it to this form and ensure you include your reference number (if known) and the name of the deceased).

Note: Substantiation documents to support this request are required. For example, this may include documents detailing the health and/or safety reason resulting in additional costs, an invoice that breaks down the specific honorarium, and/or an explanation of the extraordinary circumstances.

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Please attach the itemized final quotes/invoices and other relevant documents showing all of the costs of the funeral.
Section 4 - Submission of this form

Please submit a completed version of this form by email, fax, or mail.

Submitting by Email:
- CSS.FuneralBenefits@gov.ab.ca
- Subject line: Funeral Benefits Request for an Exceptional Amount

Submitting by Fax:
- 780-643-9228 in Edmonton or toll-free 1-855-643-9228
- TO: Health and Funeral Benefits Unit
- FOR: Funeral Benefits Request for an Exceptional Amount

Submitting by Mail:
- Health and Funeral Benefits Unit
  Seniors, Community and Social Services, Government of Alberta
  PO Box 805 STN MAIN
  Edmonton AB T5J 2L4

Section 5 - Declaration and signature

I declare the information I have provided is true and complete to the best of my knowledge.

__________________________________________  ________________________________________
Date yyyy-mm-dd                                   Signature of Applicant

Checklist

Documentation to be included with the completed Request for an Exceptional Amount:

☐ Itemized final quotes/invoices and other relevant documents showing all of the funeral costs, as well as any additional fees, associated with this request.
Note: Substantiation documents are required to support a request for additional funds.