

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY - GAVIN NEWSOM, GOVERNOR

CEMETERY AND FUNERAL BUREAU
1625 N. Market Blvd., Suite S-208, Sacramento, CA 95834
(916) 574-7870 | emailcfb@dca.ca.gov | www.cfb.ca.gov



CEMETERY NOTIFICATION OF CHANGE

Filing Fee \$25.00

☐ Change or addition of Corporate Officers (Complete sections A, B, E, and attach Certification Affidavit(s))			☐ Change or addition of Limited Liability Company Members (Complete sections A, C, E, and attach Certification Affidavit(s))			☐ Change or addition of Trustees (Complete sections A, D, E, and attach Certification Affidavit(s))				
SECTION A: CI	EMET	ERY INFORM	IATION							
NAME OF CEMETERY									ENSE NUMBER OA	
ADDRESS OF CEMETERY					CITY			STATE	ZIP CODE	
MAILING ADDRESS (if applicable)					CITY			CA STATE	ZIP CODE	
PHONE NUMBER					FAX NUMBEI					
()					()					
EMAIL ADDRESS (not required)					CONTACT PERSON FOR THIS APPLICATION					
SECTION B: CI	HANC	E IN CORPO	RATE O	FFICER	(Attach additio	nal pages if nee	ded)			
CORPORATE OFFICER(S) TO BE DISASSOCIATED FROM THIS CEMETERY										
TITLE	LAST NAME			FIRST NAME				DATE OF DISASSOCIATION		
CORPORATE OFFICER(S) TO BE ASSOCIATED WITH THIS CEMETERY										
TITLE	LAST NAME			FIRST NAME			DA	ATE OF ASSOCIATION		
ALL CORPORATE OFFICERS ARE REQUIRED TO SUBMIT A CERTIFICATION AFFIDAVIT										
SECTION C: CHANGE IN LIMITED LIABILITY COMPANY MEMBER(S) (Attach additional pages if needed)										
LIMITED LIABILIT	Y CON	IPANY MEMBER	(S) TO BE	DISASS	OCIATED FROM	THIS CEMET	ERY			
TITLE	LAST	NAME			FIRST NAME			DA	ATE OF DISASSOCIATION	
DATE CACHERER	FOR BUREAU USE ONLY DATE CASHIERED AMOUNT CASHIERED ATS ID NUMBER RECEIPT NUMBER DATE COMPLETED									
DATE CASHIERED		AWOUNT CASHIEREL	A IS ID NUMBE		N⊐CIV	RECEIPT NUMBE	ĸ		DATE COMPLETED	

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SECTION C: CHANGE IN LIMITED LIABILITY COMPANY MEMBER(S) (CONTINUED)								
LIMITED LIABILIT	LIMITED LIABILITY COMPANY MEMBER(S) TO BE ASSOCIATED FROM THIS CEMETERY							
TITLE	LAST NAME	FIRST NAME	DATE OF ASSOCIATION					
ALL LIMITED LIABILITY COMPANY MEMBERS ARE REQUIRED TO SUBMIT A CERTIFICATION AFFIDAVIT								
SECTION D: TRUSTEES (Only one trustee can be an officer or employee of the corporation, attach additional pages if needed)								
TRUSTEE(S) TO B	TRUSTEE(S) TO BE DISASSOCIATED FROM THIS CEMETERY							
TITLE	LAST NAME	FIRST NAME	DATE OF DISASSOCIATION					
TRUSTEE(S) TO B	E ASSOCIATED WITH THIS CEMETERY							
TITLE	LAST NAME	FIRST NAME	DATE OF ASSOCIATION					
ALL TRUSTEES ARE	REQUIRED TO SUBMIT A CERTIFICATION A	 FFIDAVIT						
SECTION E: CERTIFICATION OF APPLICANT								
I certify under penalty of perjury, under the laws of the State of California, that all information provided on this form is true								
and correct.								
SIGNATURE		 DATE						
SIGNATURE		DATE						
PRINT NAME		TITLE						

Note: All items on this form are mandatory; none are voluntary, unless indicated. Failure to provide any of the requested information will result in the application being considered incomplete (incomplete applications are subject to abandonment one year from the date the applicant is notified of deficiencies). All information provided will be used to determine qualification for licensure, per the Business and Professions Code that authorizes the collection of this information. Per California Civil Code section 1798.17 (Information Practice Act), the Bureau Chief of the Cemetery and Funeral Bureau is responsible for maintaining information on this form. This information may be transferred to other governmental and enforcement agencies. Individuals have the right to review the records maintained on them by the agencies, unless the records are exempt by section 1798.40 of the Civil Code. Requests for information may be addressed to the custodian of records: Bureau Chief, Cemetery and Funeral Bureau, 1625 North Market Blvd., Suite S-208, Sacramento, CA 95834, (916) 574-7870.

Effective July 1, 2012, the State Board of Equalization and the Franchise Tax Board may share taxpayer information with the Bureau. You are obligated to pay your state tax obligation and your license may be suspended if the state tax obligation is not paid per Business and Professions Code section 31(e).

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NOTICE ON COLLECTION OF PERSONAL INFORMATION

Collection and Use of Personal Information

The Department of Consumer Affairs Cemetery and Funeral Bureau (Bureau) collects the personal information requested on this form in accordance with Business and Professions Code (BPC) sections 30, 114.5, 115.4, 115.5, 144, 144.5, 480, the Cemetery and Funeral Act (BPC section 7600, et. seq.), and the Information Practices Act (Civ. Code section 1798, et seq.). The Bureau uses this information principally to identify and evaluate applicants for licensure, issue and renew licenses, and enforce licensing and reporting standards set by law and regulation.

Mandatory Submission

Submission of the requested information is mandatory unless otherwise noted on the application and/or form. The Bureau cannot consider your application for licensure or renewal unless you provide all of the requested information.

Failure to provide any of the requested information will result in the application being deemed incomplete pursuant to California Code of Regulations, title 16, sections 1254, 2328 and 2329. Incomplete applications are subject to abandonment one year from the date the applicant is notified of deficiencies.

In addition, BPC sections 30 and Public Law 94-455 (42 U.S.C.A. 405 (c)(2)(C)) authorize the collection of your Federal Employer Identification Number (FEIN) or Social Security Number (SSN) at the time of licensure. The information will be used for purposes of tax or child support enforcement, and verification of licensure and examination status. If you fail to disclose your FEIN or SSN, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you.

Access to Personal Information

The Bureau is responsible for maintaining the information contained within this application. You may request a copy of or review the records maintained by the Bureau that contain your personal information, as permitted by the Information Practices Act. You may submit your request to the Bureau's Custodian of Records listed in the contact information section below.

Possible Disclosure of Personal Information

The Bureau makes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances:

- In response to a Public Records Act request (Government Code Section 6250, et seq.),
- To another government agency as required by state or federal law; or,
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information

For questions about this notice or access to your records, you may contact the Custodian of Records, Cemetery and Funeral Bureau at 1625 North Market Boulevard, Suite S-208, Sacramento, CA 95834, by phone at (916) 574-7870, or by e-mail at emailcfb@dca.ca.gov. For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210, or by e-mail at dca@dca.ca.gov.