

**CEMETERY AND FUNERAL BUREAU**

1625 N. Market Blvd., S208

Sacramento, CA 95834

(916) 574-7870 FAX (916) 928-7988



**APPLICATION TO REPORT DESIGNATION OR CHANGE OF CEMETERY OR CREMATORY
MANAGER AND/OR REQUEST APPROVAL TO SHARE**

- Designate a Crematory Manager \$50.00 Fee or Designate a Crematory Manager and request approval to share \$100.00 Fee
- Designate a Cemetery Manager \$50.00 Fee or Designate a *Cemetery Manager and request approval to share \$100.00 Fee
(*submit a written statement demonstrating two years experience in the cemetery business)

SECTION A: APPLICANT INFORMATION					
Business Name				License Type and Number	
Address		City		State CA	Zip Code
Contact Person		Fax Number ()		Telephone Number ()	
SECTION B: MANAGER INFORMATION (Cemetery Managers must submit a written statement demonstrating two years experience.)					
Name of Previous Manager			License Number	Date of Disassociation	
Name of New Manager		License Type/Number		Expiration Date	Date of Association
Under this managers license is this manager designated at any other Cemetery/Crematory?			No, <input type="checkbox"/> Proceed to section D Yes, <input type="checkbox"/> Complete section C		
SECTION C: APPROVAL TO SHARE A MANAGER (The Cemetery or Crematory must be under common ownership, have a designated main office, and be within 60 miles of the main office.)					
Designated Main Office			License Number	Miles From Establishment in Section A?	
Address of Main Office			City		State Zip Code
Designated Manager is also Manager at the following licensed Cemeteries/Crematories under this CEM/CRM license.	COA/CR	COA/CR	COA/CR	COA/CR	COA/CR
Name of Corporation					
SECTION D: OWNER, PARTNER, OR CORPORATE OFFICER CERTIFICATION (Must be signed by the owner, if a Sole Owner; a Partner, if a Partnership; a Corporate Officer if a Corporation.)					
<i>I understand that this establishment must employ a licensed manager at all times, and any change of the designated manager will be reported to the Bureau within 10 days.</i>					
<i>I certify under penalty of perjury under the laws of the State of California that all statements furnished in connection with this application are true and accurate.</i>					
Signature		Title			Date
FOR BUREAU USE ONLY					
Date Cashiered	Amount Cashiered		ATS Number		Receipt Number
Date Approved	Common Ownership Checked	Within 60 Miles	Related License	CR/COA License Ordered	Manager License Ordered