



REQUEST FOR TEMPORARY RECOGNITION OF OUT-OF-STATE EMBALMERS DURING A STATE OF EMERGENCY

In response to the Governor's March 4, 2020 State of Emergency Proclamation, paragraph No. three (3), concerning the State's preparation and response to the COVID-19 outbreak, out-of-state licensed embalmers must obtain authorization from the Governor's Office of Emergency Services prior to providing embalming services in California. Please complete this form and submit it to emailcfb@dca.ca.gov.

Authorization for temporary recognition is requested for the below embalmer(s) assigned to:

FUNERAL ESTABLISHMENT _____ in the **COUNTY(S)** of:

_____ Beginning on: _____ and ending on _____.

Funeral establishment requesting staffing authorization (print):

	FD
Funeral Establishment Name	Funeral Establishment License Number

	Full Name of Out-of-State Embalmer	Certification/ License #:	Issuing State	Expiration Date
1.				
2.				
3.				
<i>*continue on page 2 if needed</i>				

Additional Instructions:

- A copy of the embalmer's current license/certification and a photo identification must be submitted with this form.

I attest that I have the authority to hire embalmers for the licensed funeral establishment named above:

Funeral Establishment Representative -Print	Telephone	E-mail

Funeral Establishment Address	City	ST	Zip

Signature	Date

DCA/OES Use Only:

License(s) Confirmation Date: _____ Verifier's Signature: _____

List Approval Date: _____ Approver's Signature: _____

List Continued from first page:

	Full Name	Certification/ License #:	Issuing State	Expiration Date
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