



NORTH CAROLINA BOARD OF FUNERAL SERVICE

1033 WADE AVE., SUITE 108
RALEIGH, NC 27605

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COMPLETE ALL INFORMATION ON **FRONT** AND **BACK** OF THIS FORM

Preneed establishment permits expire **December 31, 2011** This application for renewal and fee of **\$150** for the 2012 permit are due by **December 31, 2011**. (See attached for Sales Licensees- \$20.00 per person) Renewal applications and fees **received after 2-1-12** must include a \$100 late fee.

2012 RENEWAL APPLICATION FOR PRENEED FUNERAL ESTABLISHMENT LICENSE

1. Business Name of Funeral Establishment: _____
2. Street Address of Facility _____
City _____ County _____ Zip _____
Mailing address (if different than Street Address) _____
City _____ County _____ Zip _____
Phone # _____ Fax # _____ E-mail _____
3. Establishment Owned by: ___(A) Individual ___(B) Partnership ___(C) Corporation ___(D) Limited Liability Company
Complete appropriate section below. Provide complete name(s) and address:
 - A. List the names and license numbers, if licensed, of the: Individual Owner (individual must be licensed by the Board as a funeral director or a funeral service licensee) _____
 - B. Partners (at least one partner must licensed by the Board as a funeral director or a funeral service licensee)

 - C. Corporation name, including parent corporation if applicable, the names of officers and their positions (an individual licensed by the Board as a funeral director or a funeral service licensee must be the President, Vice President or Chairman of the Board of Directors) _____

 - D. Members of Limited Liability Company (at least one must be licensed by the Board as a funeral director or funeral service licensee) _____

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FOR OFFICE USE ONLY

Preneed Funeral Establishment No. _____, issued _____

4. If the establishment is owned by a corporation, Limited Liability Company, or partnership, is that entity currently in good standing with the NC Secretary of State? (i.e., has not been administratively dissolved or revoked or not placed on revenue suspension.) ____ Yes ____ No (if no, attach a statement of explanation)
5. Is Applicant Solvent? ____ Yes ____ No If no, explain _____

6. Are there any unsatisfied civil judgments against applicant? ____ Yes ____ No If yes, attach a copy.
7. Has the individual owner, any partner, any officer or member of the board of directors, or member of the limited partnership ever been denied a license to engage in any occupation or profession in any state, the District of Columbia or any foreign country, had such license suspended, revoked or placed on probation, or been convicted of a crime, either a misdemeanor or felony since the last renewal? _____ Yes _____ No
 If you answered yes, attach a statement giving complete details relating to any criminal convictions. For issues relating to an occupational or professional license include jurisdiction, reason for denial the violation that led to action against license Please include relevant documents from the judicial system or from the licensing authority.
8. **Refer to Schedule A (attached) and verify all Preneed Sales Licensees registered to sell preneed for your funeral home. Make any necessary corrections, deletions, or additions and include \$20.00 per licensee with this application.**

NORTH CAROLINA
COUNTY OF _____

VERIFICATION

_____, being duly sworn, deposes and says that he/she is the sole proprietor/a partner/an officer/a member, holding the office of _____ (underline which is applicable) of the funeral establishment named above; that by authority duly given to him/her and as the act of the named business entity he/she signs this verification on behalf of the business entity; that he/she has read the foregoing application and that the same is true of his/her own knowledge, except as to matters therein stated upon information and belief, and as to those matters he/she believes them to be true.

Signature of owner/corporate officer/partner

Sworn to and subscribed before me by _____ this the _____ day
Name of applicant
 of _____, 20 _____

 Notary Public- Official Signature

S E A L

 Notary Public- Printed Name

My Commission expires _____

NOTE THE FOLLOWING: Pursuant to North Carolina General Statute 90-210.67(b) licenses expire on December 31 and must be renewed on or before February 1, 2012. After February 1, 2012 there will be a \$100.00 late fee for all preneed establishment renewals. Establishments may also be subject to additional disciplinary action if found to have conducted or offered to conduct any activity requiring the preneed license between January 1, 2012 and the date of renewal.