Application Deadline: June 30th
Applications received after July 1, you will be assessed a \$190.00 late fee
TWO YEAR LICENSE (EXPIRES JUNE 30, 2024)

NEW FEES IN EFFECT

179 Summers Street, Suite 319 Charleston, WV 25301 304.558.0302

If you make a false statement concerning any question on this application, you may be subject to disciplinary action including but not limited to revocation or suspension of your certificate.

DEMOGRAPHIC INFORMATION:				
Crematory Operator Name				
License No.		Day Phone		
Mailing Address		Email		
County of Residence		Employer		
EMPLOYMENT STATUS: check ALL th	at apply.			
☐ Employee at a crematory	□ Unemployed □	Retired	rematory	
□ Owner of a crematory	□ Other (Explain):			
CHILD SUPPORT OBLIGATION:				
Pursuant to W.Va. Code §48A-5A-5(c), each applicant fand correct. If you refuse to answer the questions, your			swearing, that these	answers are true
1. Do you have a child support obligation?			□ YES	□ NO
2. If the answer to question 1, above, is YES, are you in	arrearage (or behind in payment)?		□ YES	□ NO
3. If the answer to question 2, above, is YES, does your	arrearage equal or exceed the amoun	t of child support payable for 6 months?	□ YES	□ NO
4. Are you the subject of a child support related subpoer	na or warrant?		□ YES	□ NO
CRIMINAL BACKGROUND:				
1. Have you ever been convicted of a felony or a federal	crime?		□ YES	□ NO
2. Have you been convicted of a felony or a federal crim	ne since you last renewed your licens	e?	□ YES	□ NO
3. Are you currently charged with a felony crime, federa	al crime, or the equivalent?		□ YES	□ NO
SIGNATURE:				
I information is true and correct to the best of my knowled		ereby certify, under penalties of perjury and fa	alse swearing, that t	he above
Signature:	1	Date:		
Do <u>NOT</u> separate арр	olication from stub. Return en	ire form and payment to the address l	below.	

State of West Virginia

Board of Funeral Service Examiners

APPLICATION FEES: Attach the following fee to this application and mail to address listed below.					
License Number	Due Date	Amount Due	After July 1.	After 90 days from due date, this application becomes invalid and applicant must apply for reinstatement. Contact WVBFSE for more information on reinstatement. REINSTATEMENT FEE \$ 350.00, RENEWAL FEE \$	
COlicense #	June 30th	\$150.00	\$340.00	150.00 LATE FEE \$ 190.00 TOTAL - \$ 690.00	

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NAME:

ADDRESS:

CITY, STATE, ZIP:

Mail ENTIRE FORM to:

Board of Funeral Service Examiners 179 Summers Street, Suite 319 Charleston, WV 25301