



Branch Funeral Establishment Renewal Application

WEST VIRGINIA BOARD OF FUNERAL SERVICE EXAMINERS

Application Deadline: June 30th

Applications received after July 1 will be assessed a \$ 190.00 late fee
TWO YEAR LICENSE

NEW FEES IN EFFECT

179 Summers Street, Suite 319
Charleston, WV 25301
304.558.0302

DEMOGRAPHIC INFORMATION: Please make corrections in Red Ink.

| | | |
|-----------------------------------------|---------------------------------------------------------|--------------------------|
| Corporate or Parent Company | FEIN No. | Miles from Main Facility |
| Board License No. | Tax Department License No. | |
| Business Name | Business Type (Corporation, Sole Proprietor, LLC, etc.) | |
| Location Address City, State, Zip | Mail Address | |
| County Phone | Email | |
| Licensee-In-Charge | Affiliated Main Establishment | |
| Officers of Company or Owner's Name | | |

EMPLOYEES: FD = Funeral Director, P = Preneed salesperson, A = Apprentice.

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List Additional Employees on separate sheet of paper.

LICENSEE-IN-CHARGE CERTIFICATION OF RESPONSIBILITY (must be a full-time employee and a licensed funeral director)

I understand that I shall be named on the above-stated funeral establishment license as LICENSEE-IN-CHARGE, and therefore, shall be responsible for all transactions conducted by the funeral establishment owners and staff as well as the entire scope of private and public services conducted by owners and staff, including the responsibility for all advertisements, stationery, price lists, and other correspondence as such.

I swear that should my authority as Licensee-In-Charge cease or become compromised, for any reason whatsoever, I will immediately notify the West Virginia Board of Funeral Service Examiners thereof.

| | |
|-------------------------------|-------|
| Licensee-In-Charge Signature: | Date: |
|-------------------------------|-------|

Do **NOT** separate application from stub. Return entire form and payment to the address 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 June 30th | After July 1 | |
|----------------|----------|-------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | 06/30 | \$345.00 | \$535.00 | After 90 days from the amount due date, this application becomes invalid and applicant must apply for reinstatement. Contact WVBFS for more information on reinstatement. REINSTATEMENT FEE \$375.00, INSPECTION FEE \$ 375.00, RENEWAL FEE \$ 345.00 LATE FEE \$ 190.00 TOTAL \$ 1285.00 |

Make check or money order payable to: "WVBFS". Cash and credit card payments can not be accepted.

Main Establishment:

DBA:

Address:

City, State, Zip:

Mail ENTIRE FORM to:

Board of Funeral Service Examiners

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Charleston, WV 25301