



LICENSE APPLICATION FOR AN OWNER'S LICENSE FOR A FUNERAL HOME

Funeral and Cremation Services Council of Saskatchewan (FCSCS)
3847C Albert St., Regina, SK S4S 3R4 Phone: (306) 584-1575 or toll free 1-800-892-0116,
Fax: (306) 584-1576 Email: administration@funeralinfo.ca Website: www.funeralinfo.ca

I, _____; being a:
(Name Registered with Provincial Corporations Branch)

Check applicable box () corporation partnership sole proprietorship pursuant to the laws of the Province of Saskatchewan and carrying on business under the business name of

_____ at _____
(Print Name) (Street Address)

_____, _____ in _____ in the Province of Saskatchewan.
(Mailing Address) (Postal Code) (City)

Phone # (____) _____, Cell # (____) _____, Fax # (____) _____

Email: _____

make this application to the council to be licensed as a funeral home owner pursuant to *The Funeral and Cremation Services Act*, subsections 2(v) and 72(b).

In support of this application I provide the following information and authorize the council to investigate any information contained herein or attached hereto.

1. Name of the Officer or Director of the corporation who will responsible for directly communicating with the council _____.
(Name)

2. Name of the individual responsible for the management of the funeral home _____.
(Name)

3. The facility's business office is located at _____ in _____,

and has: (Check applicable boxes):

preparation room or body holding area _____.

Record storage area - on site off site at _____.

Prepaid, personalized merchandise storage - on site off site at _____.

4. I certify we have met any and all legal requirements, including Occupational Health and Safety and Workplace Health Workplace Hazardous Materials Information System (WHMIS), to operate our funeral home.

Please enclose the following:

- Certificate of Insurance
- Payment

Print Name and Title

Date