Application for Renewal of Licence

For Embalmers, Funeral Directors and Funeral Homes

Embalmers and Funeral Directors Act, Newfoundland and Labrador

Applicant						
Name				City/Town		
Street				Postal Code		
PO Box				Telephone		
E-mail				Cell Phone		
Type of Licence (complete separate form for				Amount of Fee		Proof of Liability Ins.
each licence)			Enclosed			
Funeral Home				\$ 195.00		Insurance Company and Policy #
Funeral Direc	neral Director			\$ 170.00		
Embalmer	lmer			\$ 170.00		
Place of Business or Employer						
Name				City/Town		
Street				Postal Code		
PO Box				Fax		
Telephone	one			E-mail		
Signature Block						
Date						
Applicant (please print)		t)				
Applicant Signature						
Please return this application to: The Embalmers and Funeral Directors Board of Newfoundland and Labrador PO Box 839 Lewisporte, NL AOG 3A0 contact@nlfuneralboard.ca						