



**APPROVAL TO TRAIN APPRENTICE EMBALMERS AND/OR
 TREAT IN AGGREGATE FOR FUNERAL ESTABLISHMENT(S) \$190 FEE**

SECTION A: FUNERAL ESTABLISHMENT INFORMATION (Designated as the main office)			
Name of Funeral Establishment		License Number FD	
Address of Funeral Establishment	City	State CA	Zip Code
Mailing Address (if applicable)	City	State	Zip Code
Telephone Number	Fax Number	Contact Name for this Application	
How many embalmings were performed by this establishment during the last 12 months?	Business and Professions Code section 7670(a)(1) requires that not less than 50 human remains per apprentice employed have been embalmed in the establishment during the 12 months immediately preceding the date of this application. If you are applying for multiple establishments to be treated in aggregate for the purpose of meeting this requirement, complete section B.		
Does this establishment employ a qualifying supervising embalmer who has practical experience as a California licensed embalmer in the two years immediately preceding this application?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Name of Supervising Embalmer (Attach a separate page for additional supervising embalmers for this location)		License Number EMB	
SECTION B: ADDITIONAL FUNERAL ESTABLISHMENT INFORMATION			
Attached a separate page for additional establishments requesting approval to be treated in aggregate.			
Name of Funeral Establishment		License Number FD	
Address	City	State CA	Zip Code
Miles from Main Office	How many embalmings were performed by this establishment during the last 12 months?		
Name of Supervising Embalmer (if different from above)	License Number EMB		
SECTION C: ADDITIONAL FUNERAL ESTABLISHMENT INFORMATION			
Name of Funeral Establishment		License Number FD	
Address	City	State CA	Zip Code
Miles from Main Office	How many embalmings were performed by this establishment during the last 12 months?		
Name of Supervising Embalmer (if different from above)	License Number EMB		

SECTION C: FUNERAL DIRECTOR CERTIFICATION

It is hereby certified that any apprentice embalmer employed by this funeral establishment shall be instructed in the study of embalming. Such instruction shall be under the supervision of an embalmer approved by the Cemetery and Funeral Bureau.

In accordance with Title 16, California Code of Regulations Section 1204(b), as the managing funeral director, it is understood that I am responsible for exercising such direct supervision and control over the conduct of the funeral establishment to ensure full compliance with the Cemetery and Funeral Bureau laws, rules, and regulations.

I hereby certify under penalty of perjury, under the laws of the State of California, that all statements made on this application, including any attached documents, are true and correct

SIGNATURE

DATE

FOR BUREAU USE ONLY

THIS APPLICATION HAS BEEN APPROVED REASON FOR DENIAL

APPROVER NAME: _____

APPROVAL DATE:

THE ABOVE-NAMED FUNERAL ESTABLISHMENT, DESIGNATED AS THE MAIN OFFICE, IS APPROVED TO EMPLOY _____ APPRENTICE EMBALMERS, PROVIDED THE FUNERAL ESTABLISHMENT EMPLOYS AT LEAST _____ QUALIFIED SUPERVISING EMBALMERS.

APPROVAL EXPIRES ON:

DATE CASHIERED

AMOUNT CASHIERED

ATS ID NUMBER

RECEIPT NUMBER

DATE COMPLETED

CEMETERY AND FUNERAL BUREAU

1625 North Market Blvd., Suite S-208, Sacramento, CA 95834

P (916) 574-7870 | F (916) 928-7988 | www.cfb.ca.gov



NOTICE ON COLLECTION OF PERSONAL INFORMATION

Collection and Use of Personal Information

The Department of Consumer Affairs Cemetery and Funeral Bureau (Bureau) collects the personal information requested on this form in accordance with Business and Professions Code (BPC) sections 30, 114.5, 115.4, 115.5, 144, 144.5, 480, the Cemetery and Funeral Act (BPC section 7600, et. seq.), and the Information Practices Act (Civ. Code section 1798, et seq.). The Bureau uses this information principally to identify and evaluate applicants for licensure, issue and renew licenses, and enforce licensing and reporting standards set by law and regulation.

Mandatory Submission

Submission of the requested information is mandatory unless otherwise noted on the application and/or form. The Bureau cannot consider your application for licensure or renewal unless you provide all of the requested information.

Failure to provide any of the requested information will result in the application being deemed incomplete pursuant to California Code of Regulations, title 16, sections 1254, 2328 and 2329. Incomplete applications are subject to abandonment one year from the date the applicant is notified of deficiencies.

In addition, BPC sections 30 and Public Law 94-455 (42 U.S.C.A. 405 (c)(2)(C)) authorize the collection of your Federal Employer Identification Number (FEIN) or Social Security Number (SSN) at the time of licensure. The information will be used for purposes of tax or child support enforcement, and verification of licensure and examination status. If you fail to disclose your FEIN or SSN, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you.

Access to Personal Information

The Bureau is responsible for maintaining the information contained within this application. You may request a copy of or review the records maintained by the Bureau that contain your personal information, as permitted by the Information Practices Act. You may submit your request to the Bureau's Custodian of Records listed in the contact information section below.

Possible Disclosure of Personal Information

The Bureau makes every effort to protect the personal information you provide us. The information you provide, however, may be disclosed under the following circumstances:

- In response to a Public Records Act request (Government Code Section 6250, et seq.),
- To another government agency as required by state or federal law; or,
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information

For questions about this notice or access to your records, you may contact the Custodian of Records, Cemetery and Funeral Bureau at 1625 North Market Boulevard, Suite S-208, Sacramento, CA 95834, by phone at (916) 574-7870, or by e-mail at emailcfb@dca.ca.gov. For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210, or by e-mail at dca@dca.ca.gov.