

PHYSICAL ADDRESS:  
 4276 LOMAC STREET  
 MONTGOMERY, AL 36106  
 WEBSITE:www.fsb.alabama.gov



MAILING ADDRESS:  
 P O BOX 309522  
 MONTGOMERY, AL 36130  
 PHONE: 334.242.4049  
 FAX: 334.353.7988

**Alabama Board of Funeral Services  
 ESTABLISHMENT RENEWAL  
 FOR THE RENEWAL PERIOD OF OCTOBER 1, 2024 THROUGH OCTOBER 1, 2026  
 This form must accompany your renewal fee.**

PLEASE PRINT

ESTABLISHMENT NAME		LICENSE NUMBER	
MAILING ADDRESS	CITY	STATE	ZIP
PHYSICAL ADDRESS	CITY	STATE	ZIP
EMAIL ADDRESS*			CONTACT NUMBER
MANAGING FUNERAL DIRECTOR			LICENSE NUMBER
RESIDENCE PHYSICAL ADDRESS (NO PO BOXES)			CONTACT NUMBER
MANAGING EMBALMER			LICENSE NUMBER
RESIDENCE PHYSICAL ADDRESS (NO PO BOXES)			CONTACT NUMBER
MANAGING CREMATIONIST			LICENSE NUMBER
DOES THIS ESTABLISHMENT SELL PRE-NEED FUNERALS? IF YES, LIST CERTIFICATE OF AUTHORITY NUMBER _____			YES <input type="checkbox"/> NO <input type="checkbox"/>
DOES THIS ESTABLISHMENT HAVE A CREMATORY ON THE PREMISES?			YES <input type="checkbox"/> NO <input type="checkbox"/>
DOES EMBALMING OCCUR AT THIS ESTABLISHMENT? IF NO, WHERE? _____ IF NO, ESTABLISHMENT MUST MEET REQUIREMENTS TO QUALIFY AS A BRANCH LOCATION.			YES <input type="checkbox"/> NO <input type="checkbox"/>
TYPE OF OWNERSHIP	SOLE PROPRIETOR	PARTNERSHIP	
<b>**IF PROPRIETORSHIP OR PARTNERSHIP, LIST NAME(S) OF OWNER(S). MUST BE COMPLETED IF APPLICABLE.</b>			
NAMES OF OWNER(S)			
TYPE OF OWNERSHIP	CORPORATION	LLC	
<b>**IF CORPORATION OR LLC, LIST CORPORATE NAME REGISTERED WITH ALABAMA SECRETARY OF STATE, OFFICERS, AND TITLES. MUST BE COMPLETED IF APPLICABLE.</b>			
REGISTERED NAME OF CORPORATION OR LLC			
OFFICERS NAMES AND TITLES			
<i>I UNDERSTAND THAT ANY FALSE INFORMATION WILL SUBJECT THE LICENSE TO SUSPENSION OR REVOCATION.</i>			
<b>SIGNATURE</b>		<b>RELATIONSHIP TO ESTABLISHMENT</b>	<b>DATE SIGNED</b>
SWORN AND SUBSCRIBED BEFORE ME A NOTARY PUBLIC IN THE STATE OF ALABAMA ON THIS _____ DAY OF _____, 20_____.  <div style="text-align: right; margin-right: 50px;">           _____            NOTARY SIGNATURE             _____            MY COMMISSION EXPIRES         </div>			
SELECT LICENSE FOR RENEWAL (✓)			
FUNERAL ESTABLISHMENT (\$500.00) LICENSE NO _____			
<b>OFFICE USE ONLY</b>			
RECEIVED	POSTED	CA,CK,CC,CCK,MO	POSTED BY
			CONTROL NUMBER
			EST