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ALABAMA BOARD OF FUNERAL SERVICES

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CHARLES PERINE
DIRECTOR

APPLICATION FOR FINANCIAL STATEMENT WAIVER FOR CERTIFICATE OF AUTHORITY LICENSE RENEWAL

IF GRANTED, THE FINANCIAL STATEMENT WAIVER WILL APPLY ONLY TO THE UPCOMING LICENSE RENEWAL. A NEW APPLICATION MUST BE FILED FOR EACH YEAR THAT A FINANCIAL STATEMENT WAIVER IS DESIRED.

NOTE: IF THE CERTIFICATE OF AUTHORITY LICENSE HAS ANY OUTSTANDING PRENEED CONTRACTS THAT ARE FUNDED BY A SURETY BOND OR A LETTER OF CREDIT, THE CERTIFICATE OF AUTHORITY LICENSE DOES NOT QUALIFY FOR A FINANCIAL STATEMENT WAIVER.

Indicate completion of the items in the checklist by marking the box next to each item. If the applicant cannot mark all boxes acknowledging each item on the checklist, DO NOT SUBMIT THE APPLICATION.

REQUIRED QUALIFICATIONS	MET
There are no valid complaints filed against the Certificate of Authority license since the last examination	
There have been no administrative actions instituted against the Certificate of Authority license since the last examination	
All outstanding preneed contracts written by the Certificate of Authority license or any of the Branch Registrant licenses registered under the Certificate of Authority license since April 30, 2002, are fully funded in accordance with the Alabama Preneed Funeral and Cemetery Act of 2023	
All outstanding preneed contracts written by the Certificate of Authority license or any of the Branch Registrant licenses registered under the Certificate of Authority license since April 30, 2002, are funded by life insurance, annuity, or trust with the deposit of one hundred percent (100%) of all funds collected on all outstanding preneed contracts in trust within thirty (30) days after the end of the calendar month in which the funds are collected	
All required requested records have been provided to the Board in a timely manner	

REQUIRED DOCUMENTS	SUBMITTED
This application completed in its entirety (each question, checkbox, or required attachment should be acknowledged regardless of applicability)	
A copy of the Preneed Contract Sales Log showing the Net Amount of Contracts for all outstanding preneed contracts	
A copy of the Contract Status Report from the trust company to show trusted and non-trusted amounts for each outstanding preneed contract funded by trust	
Report of Preneed Activity for the Certificate of Authority license as well as each Branch Registrant license registered under the Certificate of Authority license	

- Questions regarding an application should be e-mailed to preneed@fsb.alabama.gov or submitted through our website: www.fsb.alabama.gov > About Us > Contact Us
- No application will be considered for approval until all items on the checklist are satisfied, unless otherwise approved by the Board

ATTENTION: IF ADDITIONAL INFORMATION IS REQUIRED BY THE BOARD, THE REQUESTED INFORMATION MUST BE PROVIDED NO LATER THAN THE DATE GIVEN IN THE REQUEST. FAILURE TO RESPOND TIMELY WILL RESULT IN A DENIAL OF THE APPLICATION.

ANY PERSON KNOWINGLY PRESENTING FALSE OR FRAUDULENT INFORMATION TO THE ALABAMA BOARD OF FUNERAL SERVICES OR ITS REPRESENTATIVE(S) MAY BE GUILTY OF A CLASS C FELONY PURSUANT TO TITLE 34, CHAPTER 13, OF THE CODE OF ALABAMA 1975. THE FINANCIAL STATEMENT WAIVER DOES NOT EXEMPT THE CERTIFICATE OF AUTHORITY LICENSE FROM HAVING A FINANCIAL STATEMENT ON FILE. THE CERTIFICATE HOLDER MUST BE ABLE TO PRODUCE A FINANCIAL STATEMENT AT ANY TIME WHEN REQUESTED BY THE BOARD. BY SIGNING BELOW, THE AUTHORIZED REPRESENTATIVE OF THE CERTIFICATE OF AUTHORITY LICENSE CERTIFIES THAT THE REQUIREMENTS SPECIFIED IN THIS APPLICATION HAVE BEEN SATISFIED TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF. THE AUTHORIZED REPRESENTATIVE OF THE CERTIFICATE OF AUTHORITY LICENSE FURTHER CERTIFIES THAT THEY HAVE LEGAL RIGHT TO ACT AS AUTHORIZING REPRESENTATIVE OF THE CERTIFICATE OF AUTHORITY LICENSE.

NAME OF CERTIFICATE OF AUTHORITY LICENSE:			
D/B/A NAME (if applicable):			
TYPE OF BUSINESS ENTITY (check one):			
<input type="checkbox"/> Insurance/Annuity	<input type="checkbox"/> Trust	<input type="checkbox"/> Surety Bond	<input type="checkbox"/> Letter of Credit
CERTIFICATE OF AUTHORITY LICENSE NUMBER:		DATE OF APPLICATION:	
SUBMIT A COPY OF THE PRENEED CONTRACT SALES LOG WITH THIS APPLICATION TO SHOW THE NET AMOUNT OF CONTRACT FOR ALL OUTSTANDING CONTRACTS WRITTEN UNDER THE CERTIFICATE OF AUTHORITY LICENSE OR ANY BRANCH REGISTRANT LICENSE REGISTERED UNDER THE CERTIFICATE OF AUTHORITY LICENSE.			
NAME OF AUTHORIZED REPRESENTATIVE OF THE CERTIFICATE OF AUTHORITY LICENSE:			
SIGNATURE OF AUTHORIZED REPRESENTATIVE OF THE CERTIFICATE OF AUTHORITY LICENSE:			