



NORTH CAROLINA BOARD OF FUNERAL SERVICE

1033 Wade Ave., Suite 108
Raleigh, North Carolina 27605

PHONE. (919) 733-9380
FAX (919) 733-8271

APPLICATION FOR RENEWAL OF REMOVAL/TRANSPORT PERMIT

COMPLETE ALL INFORMATION ON FRONT and BACK OF THIS FORM

NOTE: Removal/Transport Permits expire December 31, 2016. A completed renewal application and fee of **\$75.00** for the 2017 permit are due by **December 31, 2016**. Renewal applications or fees received after February 1, 2017 must include a **\$50** late fee. Permit holders may also be subject to additional disciplinary action if found to have transported or offered services to transport without a permit between January 1, 2017 and the date of renewal.

1. Name in Full: _____
(Mr., Mrs., or Ms.) First Middle Last

2. Home Address: _____
 Number & Street County

 City State Zip

3. Telephone Number: _____

4. Date of Birth: _____ Place of Birth: _____ Sex: _____

5. Name and Address of Transportation/Removal Service: _____

PO Box Street City Zip

6. North Carolina driver's license number: _____

7. _____
Make Year Model License Plate Number

of vehicle used for removal and transportation. **Attach proof of insurance for this vehicle.**

8. Since your last permit was issued, have you been convicted of any felony or misdemeanor crime(s), including traffic infractions? No ____ Yes ____

If yes, attach a detailed statement providing the jurisdiction, charge, and disposition of each conviction.

(OVER)

VERIFICATION BY APPLICANT

STATE OF NORTH CAROLINA

COUNTY OF _____

_____, being first duly sworn, deposes and says that he (she) is the applicant named in the foregoing application; that he (she) has read the foregoing application and that the same is true of his (her) own knowledge except as to matters and things therein stated on information and belief and that as to such matters and things he (she) believes it to be true. The applicant further deposes and says that he (she) has read and understands the rules relating to the removal and transportation of dead human bodies and any guidelines as may be adopted by the Board. The applicant understands that, should a permit be granted, it may be revoked or suspended under the provisions of Article 13A, Chapter 90, General Statutes of North Carolina and the Rules of the State Board of Funeral Service adopted pursuant to said Article.

Signature in full of Applicant

Sworn to and subscribed before me by _____ this the _____
Name of Applicant
day of _____, 20 ____.

Notary Public – Official Signature

SEAL

Notary Public – Printed Name

My commission expires: _____

Pursuant to 21 NCAC 34A.0202 and GS 25-3-506, a fee of \$25.00 will be charged for returned checks.