

LICENSE RENEWAL APPLICATION FEE: \$80.00

LOUISIANA STATE BOARD OF EMBALMERS AND FUNERAL DIRECTORS
3500 N. CAUSEWAY BLVD. SUITE 1232, METAIRIE, LA 70002
PLEASE RETURN COMPLETED APPLICATION WITH CORRECT FEE.

License will not be mailed out prior to
MAY 1st.

NAME: _____

ADDRESS: _____

Telephone #: _____

Home/Cell #: _____

ALL QUESTIONS MUST BE ANSWERED

Felony Conviction? Yes _____ No _____

Are you active as Retort operator ? Y / N

Where Employed? _____

Not Employed: _____ Part Time: _____ Retired: _____

Signature: _____

Please Note Address Change on Form

LICENSES NOT RENEWED BY MAY 15th SHALL BE CONSIDERED REVOKED

Payment Information: _____ Mastercard _____ Visa _____ Discover _____ Debit _____ Check

Card #: _____ Exp. Date: _____ SC/CV Code #: _____

Name as it appears on card: _____

Handwriting MUST be neat and legible.