



Louisiana State Board of Embalmers
And Funeral Directors
New Orleans, LA

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Complaint Process

The LSBEFD investigates complaints against licensed establishments and/or licensed individuals who are practicing embalming and funeral directing and/or individuals practicing without a license and has the authority to discipline individuals who are found to have violated the law.

The LSBEFD is an Administrative Board only, but also takes its role of public protection seriously; ***but, can only act within its authority as a regulatory board.*** If you feel an establishment or a licensed funeral director is violating the LSBEFD practice you may file a complaint with us or with the local authorities. This board will not file a complaint with the local law enforcement; but, encourage you to do so if you feel it necessary. You have the right to consult with a legal counselor for legal advice or guidance. *Please note: This Board is not authorized with "police" powers and cannot act immediately or intervene in a situation. This Board does not have the authority to award monetary compensation to individuals.*

You may review further information upon our website under "Notices and Information" – FAQs for frequently asked questions.

Complaints; Please included as much information as possible when submitting the Affidavit and Complaint form (attached below) with the Board. If applicable, please include copies of documents (do not include originals) and any information that you were provided by the funeral home (purchase agreement, authorizations, goods and services contract...). The more information that is provided, the better an "investigative report" can be compiled. Please provide a phone number in case you need to be contacted for further information.

Once the LSBEFD has received your Affidavit and Complaint form, the process is as follows:

- 1) You will be notified that your complaint has been received;
- 2) An investigation by our legal staff will be conducted.
- 3) The Complaint Review Committee will review documentation from all parties to determine if any possible violations have occurred within LA R.S. 37:831 – 37:885 and Title 46, Part XXXVII, Chapter 1 – 23 of the LSBEFD regulations.
- 4) Once a determination has been made, you will receive notification, in writing, of the review decision.

If possible/alleged violations are indicated, in the reviewer's opinion, then the Board will determine the appropriate course of action based on the facts and circumstances of each case.

Should a hearing be held, it will be arranged according to the Louisiana Administrative Procedures Act, all parties will be given advance notice and all parties involved will be given the opportunity to present their case to the entire Board.

The Board consists of nine (9) Governor appointed members serving four (4) year terms. Eight (8) members are active licensees and one (1) member is a consumer representative. The Board has the legal authority to sanction, revoke, suspend, or restrict the licenses that they regulate. The Board does not have the authority to regulate the actual prices charged by funeral homes. The Board does, however, regulate the manner in which prices are charged and displayed.

The Complaint Review Committee will process your complaint as effectively and quickly as possible.

All communication will be processed in writing via USPS mail delivery or email (preferred).

Please feel free to contact our office if you have any questions.

The Affidavit and Complaint form follows below: Please review the form which is two (2) pages. If extra room is needed for outlining the details, please continue on additional pages and attach accordingly. Attach any necessary documentation. The second (2nd) page MUST be notarized.

Please note that a definite time frame and date cannot specifically be given due to the investigative process. Investigating a formal complaint takes time and therefore, your patience is greatly appreciated.



**Louisiana State Board of Embalmers
and Funeral Directors**

"SUGGESTED FORM"
AFFIDAVIT AND COMPLAINT

I, _____
Please print

Address City State Zip Code

Telephone Number Email address

of lawful age and being first duly sworn state:

1. I wish to file this Affidavit and Complaint with the Louisiana State Board of Embalmers and Funeral Directors against (licensees); _____

2. That the date of the alleged incident(s) is on or about; _____

3. The facts on which the complaint is based are as follows; _____

You may continue documenting on additional pages, please attach accordingly.

Signature of Complainant

Date

Please attach any additional pages or appropriate information to be incorporated by reference.

Before me, the undersigned Notary Public, personally came and appeared _____

who, after being duly sworn, states that he/she has read the foregoing Affidavit and Complaint and knows the contents therefore; and that the same is true and correct to the best of his/her knowledge, information and belief.

(SEAL)

SWORN TO AND SUBSCRIBED by me,

this _____ day of _____.

20____, at _____.
Louisiana.

NOTARY PUBLIC

Your contact information is very important. Please do not forget to add the necessary information that is requested on the first page of this form.

We will be in contact with you regarding this complaint.

You may fax this notarized form to 504.838.5112

Or

You may scan and email to kmichel@lsbefd.state.la.us

