



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

Suite 1232, The Executive Towers
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Metairie, LA 70002
504 838-5109
FAX: 504.838.5112

www.lsbefd.state.la.us
Toll free: 888.508.9083

LEGAL NAME CHANGE FORM

In order to have your name changed, please submit this form to the board with a copy of the legal document regarding your name change (i.e. marriage certificate, divorce decree, or other court document for name change, etc.).

Name changes will not be made without proper documentation.

There is no fee required for a name change.

License Number (E / U / Retort Operator)	Social Security No. (Required)
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Legal name is changing from:

Last name	First name	Middle name
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Legal name is changing to:

Last name	First name	Middle name
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Current Contact Information:

Address:		
City:	State	Zip Code
Email	Phone	

If you would like a wall certificate with the name change, please complete and submit a "Duplicate Wall Certificate" application.

