

## Texas Funeral Service Commission Funeral Director / Embalmer Renewal Application

- Complete ALL SECTIONS of this application and RETURN THIS FORM with ALL requested information along with the appropriate fee(s). **INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**
- **Renewal Fees and Application must be RECEIVED on or before Expiration Date. Make payment by money order or check only.**
- Licenses cannot be renewed until all fees and penalties are paid and all continuing education requirements have been met. No person may renew a license if he/she is in default on a loan guaranteed by the Texas Guaranteed Student Loan Corporation (TGS LC). Contact TGS LC at (800) 252-9743.
- A license expired for one year or more **CANNOT** be renewed. Contact the agency for more information.

**Licensee Name:** \_\_\_\_\_

**License Number(s)** \_\_\_\_\_ **License Expiration:** \_\_\_\_\_

**Please check appropriate box:**

- \$197.00      Renewal fee for a Funeral Director **OR** Embalmer license if not Expired.
- \$289.50      Renewal fee PLUS late penalty fee paid if Expired less than 90 days.
- \$382.00      Renewal fee PLUS late penalty fee paid if Expired more than 90 days or less than 1 year.
  
- \$332.00      Renewal fee for a Funeral Director **AND** Embalmer license if not Expired.
- \$492.00      Renewal fee PLUS late penalty fee paid if Expired less than 90 days.
- \$652.00      Renewal fee PLUS late penalty fee paid if Expired more than 90 days or less than 1 year.
  
- \$197.00      Age 65 or older and/or 75% disabled renewal fee for a Funeral Director **AND** Embalmer.
- \$222.00      Renewal Fee PLUS late penalty fee if license is Expired.
- \$104.50      Age 65 or older and/or 75% disabled renewal fee for a Funeral Director **OR** Embalmer.
- \$129.50      Renewal Fee PLUS late penalty fee if license is Expired.
- \$12.00      Age 65 or older and/or 75% disabled renewal fee for **INACTIVE** License (Single/Dual)
- \$37.00      Renewal Fee PLUS late penalty fee is licensed is Expired.

Please verify and correct your mailing address and identifying information.

Gender: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

**PREVIOUS ADDRESS ON FILE:**

Address	
City	
State/Zip	
Phone	
Phone	

**UPDATE ADDRESS AS FOLLOWS:**

Address	
City	
State/Zip	
Phone	
Phone	

**HOME ADDRESS IF DIFFERENT THAN MAILING ADDRESS:**

Address	
City	
State/Zip	
Phone	

**SECTION A – Criminal History**

Since your last license issuance, have you been convicted of a Felony or a Misdemeanor?  Yes  No

If you answered “yes,” please explain in detail and include the outcome. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Attach additional pages/documentation as necessary.)*

**SECTION B – Continuing Education Certification**

Sixteen hours of Continuing Education are required to renew a license unless retired or disabled. In the space provided below, list the continuing education training attended during the current renewal period. (Use extra sheet of paper if necessary.) Copies of certificates or other documentation of attendance/participation must be submitted with the application.

Provider Name	Date Attended	Credit Hours Awarded	Provider Approval #

By signing below I attest to the fact the information on this form, as well as the information on any attachment(s) sent to the Texas Funeral Service Commission, associated with submittal of this renewal, is true and correct. Additionally, I attest to the fact that I have completed the required number of continuing education hours needed for renewal of my license. I understand that providing false or incorrect information may constitute a violation of the Texas Funeral Service Commission Rules and Regulations and may be grounds for revocation, suspension, penalties, or refusal to issue or renew the individual license.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
License Number

Subscribed and sworn to me, the undersigned Notary Public of the State of Texas on this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_. My Commission expires on \_\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Signature of Notary Public

## **EMPLOYER INFORMATION**

**PLEASE LIST YOUR CURRENT PLACE OF EMPLOYMENT AND A TELEPHONE NUMBER FOR OUR RECORDS. FAILURE TO COMPLETE THIS SECTION MAY RESULT IN YOUR LICENSE NOT BEING RENEWED.**

**If you change your place of employment, please notify the Texas Funeral Service Commission in writing.**

<b>Licensee Name and License Number</b>
<b>Establishment Name</b>
<b>Establishment Address</b>
<b>Establishment Phone</b>
<b>E-Mail Address</b>