



Provisional Licensing Program Amendment to Application

Provisional Licensee's Printed Name

Provisional License #

Please complete form and return to the Commission within 10 days of changes to any of the following:

1. Check appropriate box:

Add establishment location for additional casework (Must Complete #5)

Change of employment location (Must Complete #4)

2. List NEW/Additional Establishment

Funeral Establishment or Commercial Embalming Facility

Establishment License # (mandatory)

3. Name & License Number of FDIC or EIC the NEW/Additional establishment.

FDIC/EIC Printed Name

Signature

License #

4. If changing employment, list OLD Establishment (The Establishment you want removed from your file)

Funeral Establishment or Commercial Embalming Facility

Establishment License # (mandatory)

5. Name and license number of CURRENT FDIC or EIC if ADDING an establishment for extra casework.

FDIC/EIC Printed Name

Signature

License #

Provisional Licensee Signature

Date

Email to: LICENSING@tfsc.texas.gov