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**CEMETERY,
 CREMATORIUM &
 FUNERAL SERVICE**
 Notice of Change
 Business Information

BUSINESS INFORMATION

Licensee Name: _____
 Doing Business As: _____
 Licence Number: _____ Effective Date of Change: _____

TYPE OF CHANGE

- Change of Licensed Location Address ****Fee Required******
 - Provide municipal business licence of the new address. An inspection may be required prior to licensing.
- Change of Mailing Address**
- Change of Corporate Office Address**
- Change of Corporate Name: Addition / Deletion of Trade Name ****Fee Required******
 - Provide certificate from BC Registrar of Companies certifying the change
- Change of Off-Site Refrigeration for the Storage of Human Remains**
 - Provide a copy of the [Refrigeration Contract Statutory Declaration](#) signed by yourself and the provider
- Change of Person in Charge of Location**
- Change of Phone, Fax, Email Address**
- Change of Fiscal Year End**
 - Provide approval letter of filing change from Canada Revenue Agency

DETAILS OF CHANGE

From: _____ **To:** _____

Authorized signing officer:

Signature _____ Print Name _____
 Date _____ Title _____

APPLICATION FEE (see current fee schedule)

Pay by cheque or money order, or
 Pay by Credit Card – complete [credit card authorization form](#) using Visa, Mastercard or American Express.
 Application fees are non-refundable. A service charge will be applied for any dishonoured payments.

Send completed form, applicable attachments and application fee by email.
 Email: operations@consumerprotectionbc.ca