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**STATUTORY DECLARATION
 INACTIVE FUNERAL DIRECTOR
 STATUS**

STATUTORY DECLARATION

THE CREMATION, INTERMENT AND FUNERAL SERVICES ACT

CANADA)
 PROVINCE OF)
 BRITISH COLUMBIA)

IN THE MATTER OF A

<input type="checkbox"/>	Funeral Director
<input type="checkbox"/>	Embalmer
<input type="checkbox"/>	Funeral Director/Embalmer

(Check one)

licence held by _____
 (Name of Applicant)

TO WIT:

I, _____, of _____, in _____,
 (Name in Full) (City/Town) (Province/State)

holder of a _____, Licence Number _____ issued by the Consumer Protection BC
 (Licence Type)

DO SOLEMNLY DECLARE THAT:

having determined to that I wish to place my funeral director/embalmer licence into INACTIVE status temporarily, I:

- 1) am no longer acting or holding myself out as a funeral director/embalmer consistent with Sections 39 (1) and 39 (2) of the Cremation, Interment and Funeral Services Regulation (the Regulation);
- 2) will continue to remit the applicable fee and renew my licence on an annual basis;
- 3) will, pursuant to Section 38 (1) of the Regulation, maintain my continuing education credit requirements to a level satisfactory to the Director;
- 4) will, pursuant to Section 38 (2) of the Regulation, undergo additional testing or education requirements, to be determined by the Director, should I allow my inactive status to exceed the twenty-four (24) month period immediately following the signing of this statutory declaration;

and I MAKE THIS SOLEMN DECLARATION conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

DECLARED BEFORE ME

at _____, _____, this
 (City) (Province/State)

_____ day of _____, 20____.
 (Month) (Year)

 (Commissioner's Signature)

 (Applicant's Signature)

A Lawyer, Notary Public or Commissioner for taking Affidavits

In the Province/State of _____
 (Province/State)

Commissioner's Stamp Here