

**APPLICATION FOR APPOINTMENT TO  
BOARD OF FUNERAL, CEMETERY AND CONSUMER SERVICES**

*Please complete and return this questionnaire, with the other required documents, to the Florida Department of Financial Services, Division of Funeral, Cemetery and Consumer Services, at the address provided at the end of this form. This questionnaire MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. You may attach additional sheets of paper as needed to fully respond to any of the questions.*

**APPLICATION DEADLINE: APPLICATIONS MUST BE RECEIVED BY CLOSE OF BUSINESS ON WEDNESDAY, AUGUST 16, 2017.**

Print your name: \_\_\_\_\_

**ITEM I:**

Section 497.101(2), Florida Statutes, sets forth the composition of the Board. The categories below are from this section. **Please check ALL the Board member categories for which you may be eligible for appointment.** See section 497.101, Florida Statutes for the full statutory text of member criteria.

	One member of the Board shall be a consumer member <u>who is at least 60 years of age</u> , who is a resident of Florida, has never been licensed as a funeral director or embalmer, is not connected with a cemetery or cemetery company licensed pursuant to chapter 497, and is not connected with the death care industry or the practice of embalming, funeral directing, or direct disposition.
	One member of the Board shall be a consumer member who is a <u>Certified Public Accountant</u> , has never been licensed as a funeral director or embalmer is not connected with a cemetery or cemetery company licensed pursuant to chapter 497, and is not connected with the death care industry or the practice of embalming, funeral directing, or direct disposition.  a. Please enter your Florida CPA license: _____
	One member of the Board shall be a consumer member who has never been licensed as a funeral director or embalmer is not connected with a cemetery or cemetery company licensed pursuant to chapter 497, and is not connected with the death care industry or the practice of embalming, funeral directing, or direct disposition.
	One member of the Board shall be a person licensed as a funeral director under chapter 497, who is associated with a funeral establishment licensed under chapter 497, which funeral establishment has a valid preneed license issued pursuant to chapter 497, and who owns or operates a cinerator facility licensed under chapter 497 and approved under chapter 403.  a. Please enter your funeral director license number: _____
	b. Please enter the name and license number of the funeral establishment(s) with which you are associated:
	c. Please enter the name and license number of the cinerator facility that satisfies the above requirement:

	<p>d. Please enter the name and license number of the preneed main licensee that satisfies the above requirement:</p>
	<p>Two members of the Board shall be persons licensed as funeral directors under chapter 497 who are associated with a funeral establishment.</p> <p>a. Please enter your funeral director license number: _____</p> <p>b. Please enter the name and license number of the funeral establishment(s) with which you are associated:</p>
	<p>Two members of the Board shall be persons whose primary occupation is associated with a cemetery company licensed pursuant to chapter 497.</p> <p>a. Please enter the name and license number of the cemetery company(s) that satisfies the above requirement:</p>
	<p>One member of the Board shall be a principal of a monument establishment licensed under chapter 497 as a monument builder.</p> <p>a. Please enter the name and license number of the monument establishment builder that satisfies the above requirement:</p>

NOTE: The term “associated” as used above, is from section 497.101(2), Florida Statutes, but is not defined in the statute. Please consult your dictionary for the common meaning of the term.

**ITEM 2:**

Section 497.101(2), Florida Statutes, provides in relevant part as follows: *“There shall not be two or more board members who are principals or employees of the same company or partnership or group of companies or partnerships under common control.”* Current Board members are listed below:

Jean Anderson	Lewis “Lew” Hall, Jr.
Francisco “Frank” Bango	Powell Helm
Joseph “Jody” Brandenburg	Ken Jones
Andrew Clark	Keenan Knopke
James Davis	Vanessa Oliver

To the best of your knowledge and belief, are you a principal or employee of the same company, partnership, or group of companies or partnerships under common control, as is any Board member listed above?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO

If the answer to the above is “Yes,” please name the Board member and provide the name of the company, partnership, or group of companies or partnerships under common control.

**ITEM 3:**

As required in section 497.101(8), Florida Statutes, please provide information relating to the existence and nature of all current and past employments by or contracts with, and direct or indirect affiliations or interest in, any entity or business that at any time was licensed under chapter 497. You may attach your resume or additional sheets of paper to satisfy this requirement.

**ITEM 4:**

Please note the following restriction under section 112.313(11), Florida Statutes:

(11) PROFESSIONAL AND OCCUPATIONAL LICENSING BOARD MEMBERS. – No officer, director, or administrator of a Florida state, county, or regional professional or occupational organization or association, while holding such position, shall be eligible to serve as a member of a state examining or licensing board for the profession or occupation.

Do you currently hold any position which, under section 112.313(11), Florida Statutes, would bar you from appointment to the Board of Funeral, Cemetery and Consumer Services?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO

If the answer to the above is “Yes,” please provide details.

**CERTIFICATION AND SIGNATURE:**

*I understand that any appointment tendered to me will be contingent upon the results of a background investigation, and I am aware that withholding information or making false statements on this application may be the basis for non-appointment by the Executive Office of the Governor and criminal penalties. I agree to these conditions, and I declare that I have read the foregoing application and any attachments and the facts stated within them are true, correct, and complete to the best of my knowledge and belief.*

**SIGNATURE:** \_\_\_\_\_

Please print your name here: \_\_\_\_\_

**DATE SIGNED:** \_\_\_\_\_

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**HOW TO SUBMIT YOUR APPLICATION:**

Please complete and return this form, with the other required forms and documents, to the Florida Department of Financial Services, Division of Funeral, Cemetery and Consumer Services at:

**BY EMAIL:**

Scan all documents and email to: [LaTonya.Bryant@myfloridacfo.com](mailto:LaTonya.Bryant@myfloridacfo.com)

**BY MAIL:**

Florida Department of Financial Services  
Division of Funeral, Cemetery and Consumer Services  
ATTN: LaTonya Bryant  
200 East Gaines Street  
Tallahassee, FL 32399-0361

For further information regarding the application procedure, please contact LaTonya Bryant at 850-413-3039, or by email to [LaTonya.Bryant@myfloridacfo.com](mailto:LaTonya.Bryant@myfloridacfo.com).