



Karen C. Handel
Secretary of State

STATE BOARD OF CEMETERIANS C/O
SECURITIES AND BUSINESS REGULATION
2 Martin Luther King, Jr. Drive, S.E.
Ste 802, West Tower
Atlanta, Georgia 30334
(404) 656-3920
<http://www.sos.state.ga.us/securities/>

Robert D. Terry
Division Director

Application For Registration As A Preneed Salesperson
Pursuant To The Georgia Cemetery and Funeral Services Act of 2000
Application Fee (Payable to State Board of Cemeterians) \$100.00

Part I - Employer			
Name of Preneed Dealer or Cemetery		Registration Number	
Mailing Address (Number and Street)		City	State Zip Code
Office of Employment Address (Number and Street)		City	State Zip Code
Person to Contact Regarding This application		Phone Number	

Part II - Applicant			
Name (Last)	(First)	(Full Middle or Maiden Name - specify if none)	Social Security Number
Address (Number and Street)	City	State	Zip Code
Date of Birth	Telephone Number		

Part III - Background Information	YES	NO
1. Do you have any type of working relationship with any other cemetery, preneed dealer or insurance company?		
2. Have you ever engaged in any unethical or dishonest practices in the funeral or cemetery business?		
3. Have you ever been convicted of a felony?		
4. Have you ever been convicted of a misdemeanor of which fraud is an essential element?		
5. Have you ever been convicted of a misdemeanor which involves any aspect of the funeral or cemetery business?		
6. Have you been permanently or temporarily enjoined, suspended, or barred by any court of competent jurisdiction or by any state or other jurisdiction from engaging in or continuing any conduct or practice involving any aspect of the funeral or cemetery business?		
7. Have you ever been adjudicated, civilly or criminally, to have committed fraud or violated any law of any state involving fair trade or business practices?		

ATTACH AN EXPLANATION FOR ANY QUESTIONS ANSWERED "YES"

Part IV - Applicant's Certification
I certify that I have read, understand, and agree to abide by, comply with, and adhere to all of the provisions, conditions and covenants of the Georgia Cemetery and Funeral Services Act of 2000, and the Rules and Regulations promulgated thereunder. I hereby certify that I am at least 18 years of age; that I am not subject to any order of the Secretary of State that restricts my ability to be registered as a preneed sales agent. By signing this application, I give authorization to the Office of Secretary of State to conduct a criminal history background on myself.
This _____ day of _____, 200_____
(Signature of Applicant)
(Notary Public) My Commission expires: _____

Part V - Employer Certification
I hereby certify that the applicant is authorized to offer, sell, and sign preneed contracts on behalf of the cemetery or preneed dealer listed in Part 1 of this application, that the applicant meets the qualifications for registration and that the applicant has been informed of the requirements and prohibitions of the Georgia Cemetery and Funeral Services Act of 2000 and the Rules and Regulations promulgated thereunder relating to preneed sales. I further certify that the applicant has been informed of the cemetery or preneed dealer's preneed contract, and the nature of the merchandise, services or burial rights sold by the cemetery or preneed dealer.
_____ Authorized Signature and Title