

Application for Cemetery Licensure Renewal

Application processing using Credit Card payment. Login to FACS-DICE.

Click “Renew License” link.

Lic #	Lic Type	Expire
[redacted]	PRENEED MAIN LICENSE	06/30/2021
[redacted]	REMOVAL FACILITY	11/30/2022
[redacted]	CEMETERY, LICENSED	12/31/2021

ALERTS

- ☐ Please verify that your Addresses are correct..
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.
- ☐ Your Pre-need Consumer Protection Trust Found Remittance Report is past due.
- ☐ Your Pre-need Regulatory Trust Fund Remittance Report is past due.

Select the invoice and click "Continue" button.

Administrative Help Logout [Licensee]

Home > In-Box > License Renewal

USER [REDACTED]

Invoice Number	Name	License Number - License Type	Renewal Due Date	Renewal Fee	Late Fee
☒	[REDACTED]	CEMETERY, LICENSED	12/31/2021	\$255.00	\$0.00

Back Continue

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Click "Continue" button.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout Summary

Information for Successful Processing of Your Application

- 1. PRINTER CAPABILITIES:**

You will need printer capabilities.
- 2. NON-REFUNDABLE FEES:**

In accordance with chapter 497, Florida Statutes, renewal license application fees submitted are non-refundable.
- 3. COMPLETION OF YOUR APPLICATION:**

Your application is **NOT** complete until you select a method of payment. Do not exit the system until you reach the page that advises that your application is complete.
- 4. THE FOLLOWING FORMS OF PAYMENT ARE ACCEPTED FOR APPLICATIONS:**

Credit Cards: While we do not accept Visa, all other credit cards are permitted (MasterCard, American Express, and Discover). Please keep in mind, a convenience fee will be applied if you choose this method of payment.

eCheck: eCheck works similar to paper checks and does not incur a convenience fee. A check's routing and account number are entered, then withdrawn much like using an account's debit card.

EXIT CONTINUE

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Verify or update the phone and/or fax number and click "Continue" button.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout Summary

APPLICANT INFORMATION

Application Contact

Name: [REDACTED]
License Number: [REDACTED]
Business Address: [REDACTED]
Preferred Mailing Address: [REDACTED]
Email: [REDACTED]
Primary Phone: [REDACTED]
Secondary Phone: [REDACTED]
Business Phone: ([REDACTED]) Ext: 0
Mobile Phone: ([REDACTED])
Fax: ([REDACTED])

EXIT BACK CONTINUE

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Enter the requested information and click "Continue" button.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout Summary

Background Questions

Your cemetery license [REDACTED] must be renewed on or before 12/31/2021. The requirement for annual renewal and the amount of the renewal fee is specified in s.497.265, Florida Statutes.

The renewal fee is based on the cemetery's gross sales for a 12 month period. The attached information sheet shows the statutory renewal fee schedule and additional instructions:

Please provide the gross sales information for the 12 month period.

You are reporting gross sales for the 12-month period ending on (enter date): 07/31/2022 (mm/dd/yyyy)

Gross sales for that 12-month period: \$ 5000

Renewal fee amount: \$ 255.00 (from reported gross sales) CALCULATE

LATE FEE:
Payment will be deemed late if not actually received on or before 12/31/2021, unless payment is made by U.S. mail and the envelope bears a U.S. postmark date of 12/31/2021 or earlier. Late payment will result in imposition of a late fee of \$200.00 per each month or fraction thereof late.

CALCULATION INFORMATION
Pursuant to section 497.265, Florida Statutes, your annual cemetery license renewal fee is based on the annual gross sales of the cemetery during the preceding twelve-month fiscal period.

RENEWAL FEE SCHEDULE

If gross sales were in this range	Then renewal fee is
\$0 thru \$24,999	\$255.00
\$25,000 thru \$99,999	\$355.00
\$100,000 thru \$249,999	\$605.00
\$250,000 thru \$499,999	\$905.00
\$500,000 thru \$749,999	\$1,355.00
\$750,000 thru \$999,999	\$2,255.00
\$1,000,000 thru \$4,999,999	\$3,255.00
\$5,000,000 and over	\$4,905.00

EXIT BACK CONTINUE

2.1.60345
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Enter requested information and click "Continue" button.

Application Advise Profile Update **Background Questions** Application Review Affirmation Checkout Summary

Background Questions

License Questions

Please enter your contact person's name, phone number and email address below.

Contact person's name:

Phone # with area code:

Email:

EXIT **BACK** **CONTINUE**

2.1.60350
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Select "Yes" or "No" and click "Continue" button.

Application Advise	Profile update	Background Questions	Application Review	Affirmation	Checkout	Summary
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Background Questions

License Questions

Pursuant to section 497.141(5)(a), Florida Statutes, answer the following questions:

Has the licensee or any of its principal been convicted of, pled nolo contendere to, or pled guilty to, any crime required to be reported pursuant to Section 497.142(10), Florida Statutes, that was not previously disclosed to the Department upon initial application or the most recent renewal?

If you have previously reported the criminal record to the Division of Funeral, Cemetery and Consumer Services when applying for or previously renewing the license, you are NOT required to disclose it again and you may check NO below.

The following crimes must be reported pursuant to section 497.142(10)(c), Florida Statutes:

1. Any felony no matter when committed.
2. Any misdemeanor, no matter when committed, that was directly related to the practice or activities regulated under chapter 497, F.S.
3. Any other misdemeanor not already disclosed under question b. above, which was committed within the five (5) years immediately preceding the date this application is submitted.

"Principal" is defined as follows (see section 497.005(58), Florida Statutes) "Principal" means and includes the sole proprietor of a sole proprietorship; all partners of a partnership; all members of a limited liability company; regarding a corporation, all directors and officers, and all stockholders controlling more than 10 percent of the voting stock; and all other persons who can exercise control over the person or entity.

☐ Yes
☐ No

2160330

Click "Continue" button.

Application Advise	Profile Update	Background Questions	Application Review	Affirmation	Checkout	Summary
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APPLICATION REVIEW

PRINT

After you have confirmed that the application is complete and correct, we recommend that you print this page for your records. Please review the data and answers entered so far. If any are incorrect, you will need to restart this application process.

CAUTION--This screen does NOT complete the on-line application process. There are additional screens to process before your application is deemed complete.

Florida Department of Financial Services
Division of Funeral, Cemetery & Consumer Services

APPLICANT INFORMATION

FEIN Number:
[REDACTED]

Applicant's Name:
[REDACTED]

Contact Information

Mailing Address
[REDACTED]

Contact Phone
[REDACTED]

Email Address
[REDACTED]

FEE SUMMARY

Renewal License(s) Applied For: 34-00 - Cemetery License

Application ID Number: [REDACTED] Invoice Number: [REDACTED] License Number: [REDACTED]

Renewal Fee	\$250.00
Unlicensed Activity Fee	\$5.00
Total Fees Due:	\$255.00

Application to Renew License

APPLICANT INFORMATION

FEIN Number:
[REDACTED]

Invoice Number:
[REDACTED]

Applicant's Name:
[REDACTED]

Application ID:
[REDACTED]

License Number:
[REDACTED]

Mailing Address
[REDACTED]

Business Location Address
[REDACTED]

Contact Phone
[REDACTED]

Email Address
[REDACTED]

LICENSE INFORMATION

Renewal License(s) Applied For: 34-00 - Cemetery License

FEE INFORMATION

Renewal Fee	\$250.00
Unlicensed Activity Fee	\$5.00
Total Fees Due:	\$255.00

(Continued on next page)

BACKGROUND QUESTIONS

Pursuant to section 497.141(5)(a), Florida Statutes, answer the following questions:

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The following crimes must be reported pursuant to section 497.142(10)(c), Florida Statutes:

1. Any felony no matter when committed
2. Any misdemeanor, no matter when committed, that was directly related to the practice or activities regulated under chapter 497, F.S.
3. Any other misdemeanor not already disclosed under subparagraph b. that was committed within the five (5) years immediately preceding the date this application is submitted.

"Principal" is defined as follows (see section 497.005(58), Florida Statutes) "Principal" means and includes the sole proprietor of a sole proprietorship; all partners of a partnership; all members of a limited liability company; regarding a corporation, all directors and officers, and all stockholders controlling more than 10 percent of the voting stock; and all other persons who can exercise control over the person or entity.

Yes/No	No
Please provide the gross sales information for the 12 month period.	
You are reporting gross sales for the 12-month period ending on (enter date):	07/31/2022
Please provide the gross sales information for the 12 month period.	
Gross sales for that 12-month period:	5000
Please provide the gross sales information for the 12 month period.	
Renewal fee amount:	255.00
Please enter your contact person's name, phone number and email address below.	
Contact person's name:	Test Application
Please enter your contact person's name, phone number and email address below.	
Phone # with area code:	(850)413-1577
Please enter your contact person's name, phone number and email address below.	
Email:	test@yahoo.com

DEFICIENCIES

EXIT CONTINUE

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Enter name and click "Continue" button.

Application Advise	Profile Update	Background Questions	Application Review	Affirmation	Checkout	Summary
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APPLICATION

PRINT

Please complete the following to indicate whether the information and answers provided in this on-line application is true and correct. Please type in the certifying person's name, and press Continue.

CAUTION-This screen does NOT complete the on-line application process. There are several more screens after this screen.

Whoever knowingly given false information in the course of applying for or obtaining a license under this chapter, with intent to mislead the board or a public employee in the performance of her or his official duties, or the act of attempting to obtain or obtaining a license under this chapter by knowingly misleading statements or knowing misrepresentations, constitutes a felony of the third degree.

Under penalties of perjury, I declare that I have read the foregoing application for license and that the facts stated in it are true. I understand that misrepresentation of any fact required to be disclosed through this application is a violation of the Florida Statute 497.152 (4)(f)(g)(h) may result in the denial of your renewal application and/or the revocation of my Funeral Industry licenses(s).

I understand that, per 497 Florida Statutes, all application fees are non-refundable

Last, First Name:

EXIT BACK CONTINUE

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Select "Credit Card" and click "Continue" button.

Application Advise

Profile Update

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Summary

CHECKOUT

Please select payment type below, then continue.

Name:

FEIN:

Mailing Address:

Renewal License(s) Applied For:

License Type(s)

Count

34-00 - Cemetery License

1

Itemized Fees:

Total Amount Due:

\$255.00

Pay By:

☒ Credit Card (Discover, Mastercard, American Express)

☐ E-Check

☐ Mail in Payment

EXIT

BACK

CONTINUE

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Select "OK".

 JIMMY F. JOHNSON
GOVERNOR
STATE OF FLORIDA

facsaalfdev.fldfs.com says

Application Advise

Profile Update

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Affirmation

Checkout

Summary

You have selected to PAY BY CREDIT CARD.

There is an additional charge of \$16.40 with this option.

To continue with this action click OK.

To return to the session click CANCEL.

OK

Cancel

Name:

FEIN:

Mailing Address:

Renewal License(s) Applied For:

License Type(s)

Count

34-00 - Cemetery License

1

Itemized Fees:

Total Amount Due:

\$255.00

Pay By:

☒ Credit Card (Discover, Mastercard, American Express)

☐ E-Check

☐ Mail in Payment

EXIT

BACK

CONTINUE

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Enter customer information and click "Next" button.

1 Payment Type

2 Customer Info

3 Payment

4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
1	Convenience Fee	\$16.40	1	\$16.40
2	Service Amount	\$255.00	1	\$255.00
Total				\$271.40

Payment

Payment Type

Credit/Debit Card

Customer Information

Country *
United States

First Name *
Test

Last Name *
Payment

Address *
200 E Gaines St

Address 2

City *
Tallahassee

State *
FL - Florida

ZIP/Postal Code *
32311

Phone Number
8504131577

Email *
Test@myfloridacfo.com

Next >

Payment Information

Cancel

Transaction Summary

Convenience Fee	\$16.40
Service Amount	\$255.00
TOTAL	\$271.40

Need Help?

Please complete the Customer Information Section.

Enter valid payment information and click "Next" button.

1 Payment Type

2 Customer Info

3 Payment

4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
1	Convenience Fee	\$16.40	1	\$16.40
2	Service Amount	\$255.00	1	\$255.00
Total				\$271.40

Payment

Payment Type

Credit/Debit Card

Customer Information

Address

Test Payment
200 E Gaines St
Tallahassee , FL 32311

Phone Number

8504131577

Country

United States

Email Address

Test@myfloridacfo.com

Edit

Payment Information

Credit Card Number *

Credit Card Type

MasterCard

Discover

American Express

Expiration Month *

Expiration Year *

Security Code *

Name on Credit Card *

Test Payment

☒ Payment Address is the same as Customer Information *

Next >

Cancel

Transaction Summary

Convenience Fee	\$16.40
Service Amount	\$255.00
TOTAL	\$271.40

Need Help?

You have selected to pay by credit card. Complete Customer Billing Information and enter Credit Card Information.

Click "Submit Payment" button.

1 Payment Type

2 Customer Info

3 Payment

4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
1	Convenience Fee	\$16.40	1	\$16.40
2	Service Amount	\$255.00	1	\$255.00
Total				\$271.40

Payment

Payment Type

Credit/Debit Card

Customer Information

Address

Test Payment
200 E Gaines St
Tallahassee , FL 32311

Phone Number

8504131577

Country

United States

Email Address

Test@myfloridacfo.com

Edit

Payment Information

Credit Card

Name on Credit Card

Test Payment

Edit

Cancel

Submit Payment

Transaction Summary

Convenience Fee	\$16.40
Service Amount	\$255.00
TOTAL	\$271.40

Need Help?

Review payment information. You may edit Billing and Payment Method here if needed. When complete, select Submit Payment.

User will be redirected to FCCS eAppoint website with confirmation number.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout **Summary**

SUMMARY

PRINT

Print a hard copy for your records or write down the confirmation number and the payment identification number for your records. Press continue to complete the application process.

CAUTION - Do not use your back button on your browser. This will cause you to begin the application process over again.

Name: [REDACTED]
FEIN: [REDACTED]
Mailing Address: [REDACTED]

Payment ID: [REDACTED]

Applied For: 34-00 - Cemetery License

Credit Card Confirmation Number: [REDACTED]

CONTINUE

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Click "Exit" button.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout **Summary**

SUMMARY

Thank you for submitting your application for a renewal license to the Department.

The initial review of your application will take place within 14 business days. Applicants with a reportable criminal history are reviewed on a case-by-case basis and may take up to 90 days for a final decision.

You are welcome to call the Florida Department of Financial Services, Division of Funeral, Cemetery and Consumer Services. However, calling **will not expedite** the processing of your application.

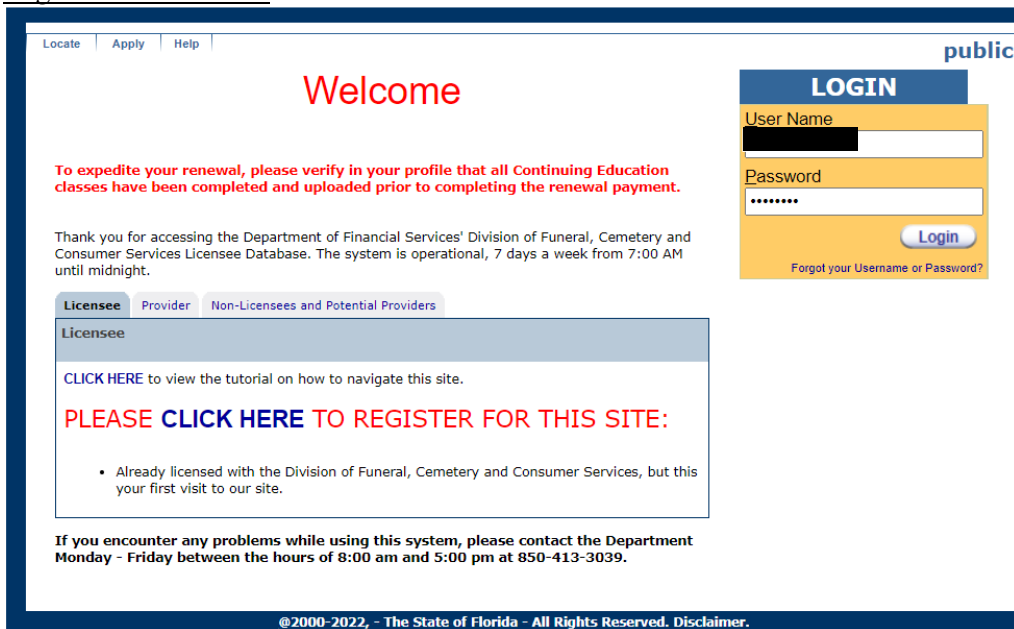
If you have any questions, please contact the Division at 1-800-323-2627 or 850-413-3039 for assistance.

EXIT

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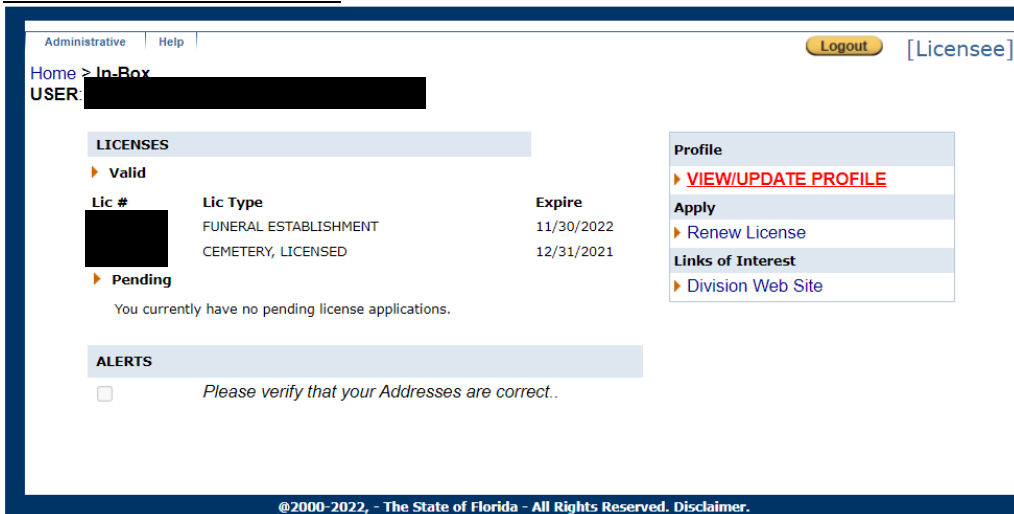
Application processing using E-Check payment.

Login to FACS-DICE.



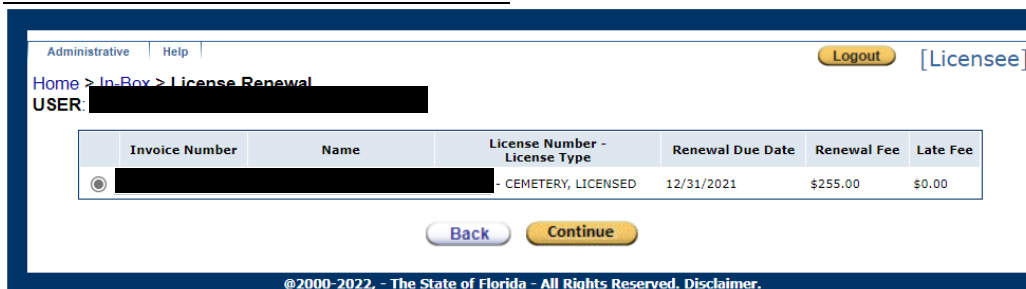
The screenshot shows the FACS-DICE login page. At the top, there are links for 'Locate', 'Apply', and 'Help'. A 'public' label is in the top right. A large 'Welcome' message is centered. Below it, a red text block states: 'To expedite your renewal, please verify in your profile that all Continuing Education classes have been completed and uploaded prior to completing the renewal payment.' A paragraph of text follows, thanking the user for accessing the Department of Financial Services' Division of Funeral, Cemetery and Consumer Services Licensee Database. On the right, there is a 'LOGIN' box with fields for 'User Name' and 'Password', a 'Login' button, and a link for 'Forgot your Username or Password?'. Below the welcome message, there are tabs for 'Licensee', 'Provider', and 'Non-Licensees and Potential Providers'. The 'Licensee' tab is active, showing a 'CLICK HERE' link to view a tutorial and a 'PLEASE CLICK HERE TO REGISTER FOR THIS SITE:' link. A bullet point indicates that users already licensed with the Division should visit the site for the first time. At the bottom, contact information is provided: 'If you encounter any problems while using this system, please contact the Department Monday - Friday between the hours of 8:00 am and 5:00 pm at 850-413-3039.' The footer reads: '@2000-2022, - The State of Florida - All Rights Reserved. Disclaimer.'

Click "Renew License" link.



The screenshot shows the FACS-DICE Licensee Profile page. At the top, there are links for 'Administrative' and 'Help'. A 'Logout' button and a '[Licensee]' label are in the top right. The breadcrumb trail is 'Home > In-Box'. The 'USER:' field is redacted. The 'LICENSES' section has two tabs: 'Valid' and 'Pending'. The 'Valid' tab is active, showing a table with columns 'Lic #', 'Lic Type', and 'Expire'. The table has two rows: 'FUNERAL ESTABLISHMENT' (expiring 11/30/2022) and 'CEMETERY, LICENSED' (expiring 12/31/2021). The 'Pending' tab shows a message: 'You currently have no pending license applications.' The 'ALERTS' section has a checkbox and the text 'Please verify that your Addresses are correct..'. On the right, there is a 'Profile' sidebar with links: 'VIEW/UPDATE PROFILE', 'Apply', 'Renew License', and 'Links of Interest' (Division Web Site). The footer reads: '@2000-2022, - The State of Florida - All Rights Reserved. Disclaimer.'

Select invoice and click "Continue" button.



The screenshot shows the FACS-DICE License Renewal page. At the top, there are links for 'Administrative' and 'Help'. A 'Logout' button and a '[Licensee]' label are in the top right. The breadcrumb trail is 'Home > In-Box > License Renewal'. The 'USER:' field is redacted. Below, there is a table with columns: 'Invoice Number', 'Name', 'License Number - License Type', 'Renewal Due Date', 'Renewal Fee', and 'Late Fee'. The table has one row with a selected invoice (indicated by a radio button) for 'CEMETERY, LICENSED' with a renewal due date of 12/31/2021, a renewal fee of \$255.00, and a late fee of \$0.00. Below the table are 'Back' and 'Continue' buttons. The footer reads: '@2000-2022, - The State of Florida - All Rights Reserved. Disclaimer.'

Click "Continue" button.

Verify and update phone and/or fax number and click on "Continue" button.

Enter requested information and click "Continue" button.

Application Advise

Profile Update

Background Questions

Application Review

Affirmation

Checkout

Summary

Background Questions

Your cemetery license [REDACTED] must be renewed on or before 12/31/2021. The requirement for annual renewal and the amount of the renewal fee is specified in s.497.265, Florida Statutes.

The renewal fee is based on the cemetery's gross sales for a 12 month period. The attached information sheet shows the statutory renewal fee schedule and additional instructions:

Please provide the gross sales information for the 12 month period.

You are reporting gross sales for the 12-month period ending on (enter date): (mm/dd/yyyy)

Gross sales for that 12-month period: \$

Renewal fee amount: \$

(from reported gross sales)

LATE FEE:
Payment will be deemed late if not actually received on or before 12/31/2021, unless payment is made by U.S. mail and the envelope bears a U.S. postmark date of 12/31/2021 or earlier. Late payment will result in imposition of a late fee of \$200.00 per each month or fraction thereof late.

CALCULATION INFORMATION
Pursuant to section 497.265, Florida Statutes, your annual cemetery license renewal fee is based on the annual gross sales of the cemetery during the preceding twelve-month fiscal period.

RENEWAL FEE SCHEDULE

If gross sales were in this range	Then renewal fee is
\$0 thru \$24,999	\$255.00
\$25,000 thru \$99,999	\$355.00
\$100,000 thru \$249,999	\$605.00
\$250,000 thru \$499,999	\$905.00
\$500,000 thru \$749,999	\$1,355.00
\$750,000 thru \$999,999	\$2,255.00
\$1,000,000 thru \$4,999,999	\$3,255.00
\$5,000,000 and over	\$4,905.00

2.1.60345
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Enter requested information and click "Continue" button.

Application Advise

Profile Update

Background Questions

Application Review

Affirmation

Checkout

Summary

Background Questions

License Questions

Please enter your contact person's name, phone number and email address below.

Contact person's name:

Phone # with area code:

Email:

2.1.60350
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Select "Yes" or "No" and click "Continue" button.

Application Advise	Profile update	Background Questions	Application Review	Affirmation	Checkout	Summary
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Background Questions

License Questions

Pursuant to section 497.141(5)(a), Florida Statutes, answer the following questions:

Has the licensee or any of its principal been convicted of, pled nolo contendere to, or pled guilty to, any crime required to be reported pursuant to Section 497.142(10), Florida Statutes, that was not previously disclosed to the Department upon initial application or the most recent renewal?

If you have previously reported the criminal record to the Division of Funeral, Cemetery and Consumer Services when applying for or previously renewing the license, you are NOT required to disclose it again and you may check NO below.

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2. Any misdemeanor, no matter when committed, that was directly related to the practice or activities regulated under chapter 497, F.S.
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☐ Yes
☐ No

2-1-60330

Click "Continue" button.

Application Advise	Profile Update	Background Questions	Application Review	Affirmation	Checkout	Summary
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APPLICATION REVIEW

PRINT

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CAUTION--This screen does NOT complete the on-line application process. There are additional screens to process before your application is deemed complete.

Florida Department of Financial Services
Division of Funeral, Cemetery & Consumer Services

APPLICANT INFORMATION

FEIN Number:
[REDACTED]

Applicant's Name:
[REDACTED]

Contact Information

Mailing Address
[REDACTED]

Contact Phone
[REDACTED]

Secondary Phone
[REDACTED]

Email Address
[REDACTED]

FEE SUMMARY

Renewal License(s) Applied For: 34-00 - Cemetery License

Application ID Number:
[REDACTED]

Invoice Number:
[REDACTED]

License Number:
[REDACTED]

Renewal Fee \$250.00

Unlicensed Activity Fee \$5.00

Total Fees Due: \$255.00

Application to Renew License

APPLICANT INFORMATION

FEIN Number:
[REDACTED]

Applicant's Name:
[REDACTED]

License Number:
[REDACTED]

Mailing Address
[REDACTED]

Business Location Address
[REDACTED]

Contact Phone
[REDACTED]

Secondary Phone
[REDACTED]

Email Address
[REDACTED]

LICENSE INFORMATION

Renewal License(s) Applied For: 34-00 - Cemetery License

FEE INFORMATION

Renewal Fee \$250.00

Unlicensed Activity Fee \$5.00

Total Fees Due: \$255.00

(Continued on next page)

BACKGROUND QUESTIONS

Pursuant to section 497.141(5)(a), Florida Statutes, answer the following questions:

Has the licensee or any of its principal been convicted of, pled nolo contendere to, or pled guilty to, any crime required to be reported pursuant to Section 497.142(10), Florida Statutes, that was not previously disclosed to the Department upon initial application or the most recent renewal?

If you have previously reported the criminal record to the Division of Funeral, Cemetery and Consumer Services when applying for or previously renewing the license, you are NOT required to disclose it again and you may check NO below.

The following crimes must be reported pursuant to section 497.142(10)(c), Florida Statutes:

1. Any felony, no matter when committed
2. Any misdemeanor, no matter when committed, that was directly related to the practice or activities regulated under chapter 497, F.S.
3. Any other misdemeanor not already disclosed under subparagraph b. that was committed within the five (5) years immediately preceding the date this application is submitted.

"Principal" is defined as follows (see section 497.005(58), Florida Statutes) "Principal" means and includes the sole proprietor of a sole proprietorship; all partners of a partnership; all members of a limited liability company; regarding a corporation, all directors and officers, and all stockholders controlling more than 10 percent of the voting stock; and all other persons who can exercise control over the person or entity.

Yes/No

No

Please provide the gross sales information for the 12 month period.	
You are reporting gross sales for the 12-month period ending on (enter date):	07/31/2022
Please provide the gross sales information for the 12 month period.	
Gross sales for that 12-month period:	5001
Please provide the gross sales information for the 12 month period.	
Renewal fee amount:	255.00
Please enter your contact person's name, phone number and email address below.	
Contact person's name:	Test Application
Please enter your contact person's name, phone number and email address below.	
Phone # with area code:	(850)413-1577
Please enter your contact person's name, phone number and email address below.	
Email:	test@yahoo.com

DEFICIENCIES

EXIT

CONTINUE

DFS-H2-2022

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Enter name and click "Continue" button.

Application Advise	Profile Update	Background Questions	Application Review	Affirmation	Checkout	Summary
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APPLICATION

PRINT

Please complete the following to indicate whether the information and answers provided in this on-line application is true and correct. Please type in the certifying person's name, and press Continue.

CAUTION- This screen does **NOT** complete the on-line application process. There are several more screens after this screen.

Whoever knowingly given false information in the course of applying for or obtaining a license under this chapter, with intent to mislead the board or a public employee in the performance of her or his official duties, or the act of attempting to obtain or obtaining a license under this chapter by knowingly misleading statements or knowing misrepresentations, constitutes a felony of the third degree.

Under penalties of perjury, I declare that I have read the foregoing application for license and that the facts stated in it are true. I understand that misrepresentation of any fact required to be disclosed through this application is a violation of the Florida Statute 497.152 (4)(f)(g)(h) may result in the denial of your renewal application and/or the revocation of my Funeral Industry licenses(s).

I understand that, per 497 Florida Statutes, all application fees are non-refundable

Last, First Name:

EXIT

BACK

CONTINUE

DFS-H2-2022

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Select "E-Check" and click "Continue" button.

Select "OK".

Select payment type and click "Next" button.

1 Payment Type

2 Customer Info

3 Payment

4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
1	Service Amount	\$255.00	1	\$255.00
Total				\$255.00

Payment

Payment Type

Payment Type *

Electronic Check

☐ Select if this payment IS being funded specifically by a **FOREIGN** source (bank or company), an International ACH Transaction ("IAT").

Next >

Customer Information

Payment Information

Cancel

Transaction Summary

Service Amount	\$255.00
TOTAL	\$255.00

Need Help?

Select Payment Method and Continue to proceed with payment.

Enter customer information and click "Next" button.

1 Payment Type

2 Customer Info

3 Payment

4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
1	Service Amount	\$255.00	1	\$255.00
Total				\$255.00

Payment

Payment Type

Electronic Check

Customer Information

Complete all required fields [*]

Country *

United States

First Name *

Test

Last Name *

Payment

Address *

200 E Gaines St

Address 2

City *

Tallahassee

State *

FL - Florida

ZIP/Postal Code *

32311

Phone Number

8504131577

Email *

Test@myfloridacfo.com

Next >

Payment Information

Cancel

Transaction Summary

Service Amount	\$255.00
TOTAL	\$255.00

Need Help?

Please complete the Customer Information Section.

1

Payment Type

2

Customer Info

3

Payment

4

Submit Payment

SKU	Description	Unit Price	Quantity	Amount
1	Service Amount	\$255.00	1	\$255.00
Total				\$255.00

Payment Type

Electronic Check

Customer Information

Address

Test Payment
200 E Gaines St
Tallahassee, FL 32311

Phone Number

8504131577

Email Address

Test@myfloridacfo.com

Country

United States

Edit

Payment Information

Name on Account *

Test Payment

☐ This is a business account.

Routing Number *

BANK OF AMERICA, N.A.

Account Number *

Re-enter Account Number *

☒ Checking
 ☐ Savings

012345678 Routing Number

01234567890 Account Number

☒ Payment Address is the same as Customer Information *

Next >

Service Amount	\$255.00
TOTAL	\$255.00

You have selected to pay by Electronic Check.
Complete Customer Billing Information and enter
Electronic Check Information.

Click "Submit Payment" button.

1 Payment Type

2 Customer Info

3 Payment

4 Submit Payment

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
1	Service Amount	\$255.00	1	\$255.00
Total				\$255.00

Payment

Payment Type

✓

Electronic Check

Customer Information

✓

Address

Test Payment
200 E Gaines St
Tallahassee, FL 32311

Phone Number

8504131577

Country

United States

Email Address

Test@myfloridacfo.com

Edit

Payment Information

✓

Electronic Check

****3452

Name on Account

Test Payment

Edit

Terms and Conditions

[Open a new window to print](#)

850-413-3039.
7. I understand the Originating ID for this transaction is [REDACTED]. Please make sure your banking institution has released any debit blocks (if applicable) for this ID to ensure successful payment.
8. I (we) agree that ACH transactions I (we) authorized comply with all applicable NACHA Rules and all applicable US law and the laws governing DFS - Funeral, Cemetery and Consumer Services's state.

☒ Yes, I authorize this transaction.

Cancel

Submit Payment

Transaction Summary

Service Amount	\$255.00
TOTAL	\$255.00

Need Help?

Review payment information. You may edit Billing and Payment Method here if needed. When complete, select Submit Payment.

User will be redirected to FCCS eAppoint website with confirmation number.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout **Summary**

SUMMARY

PRINT

Print a hard copy for your records or write down the confirmation number and the payment identification number for your records. Press continue to complete the application process.

CAUTION - Do not use your back button on your browser. This will cause you to begin the application process over again.

Name: [REDACTED]
FEIN: [REDACTED]
Mailing Address: [REDACTED]

Payment ID: [REDACTED]

Applied For: 34-00 - Cemetery License

Check Confirmation Number: [REDACTED]

CONTINUE

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Click "Exit" button.

Application Advise Profile Update Background Questions Application Review Affirmation Checkout **Summary**

SUMMARY

Thank you for submitting your application for a renewal license to the Department.

The initial review of your application will take place within 14 business days. Applicants with a reportable criminal history are reviewed on a case-by-case basis and may take up to 90 days for a final decision.

You are welcome to call the Florida Department of Financial Services, Division of Funeral, Cemetery and Consumer Services. However, calling **will not expedite** the processing of your application.

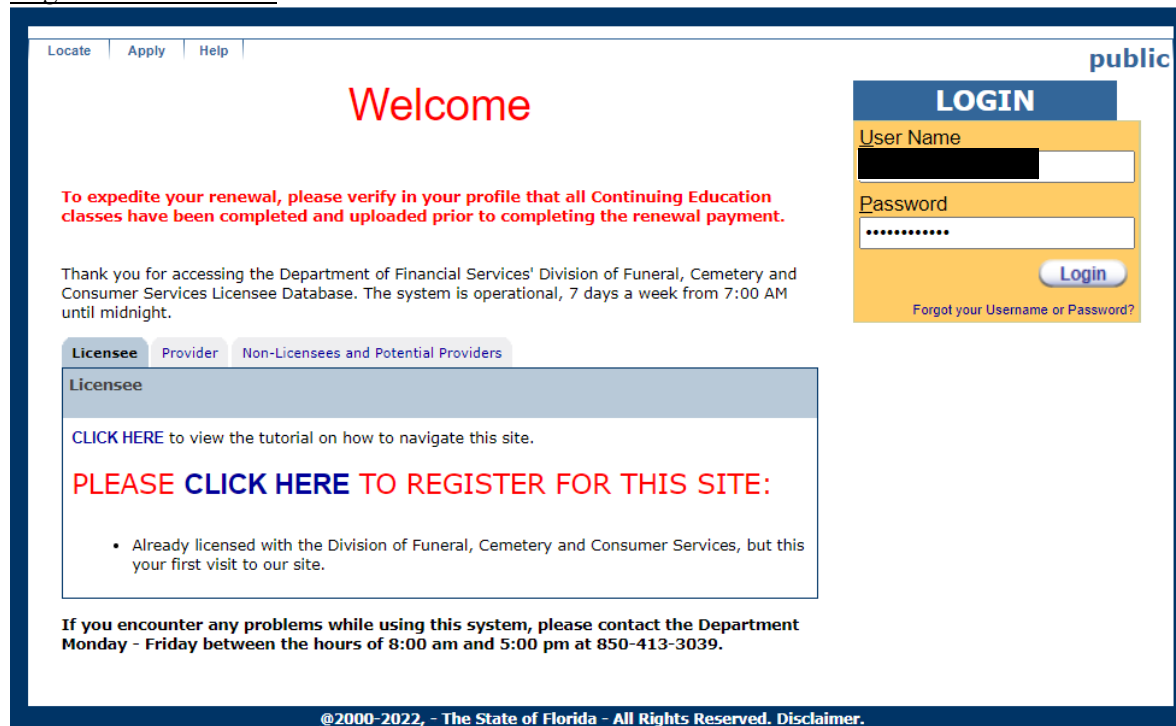
If you have any questions, please contact the Division at 1-800-323-2627 or 850-413-3039 for assistance.

EXIT

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Application processing using mail in payment.

Login to FACS-DICE.



The screenshot shows the FACS-DICE public login page. At the top, there are navigation links: 'Locate', 'Apply', and 'Help'. The word 'public' is in the top right corner. A large red 'Welcome' message is centered. Below it, a red notice states: 'To expedite your renewal, please verify in your profile that all Continuing Education classes have been completed and uploaded prior to completing the renewal payment.' A thank you message follows, stating the system is operational from 7:00 AM to midnight. On the right, there is a 'LOGIN' box with fields for 'User Name' and 'Password', a 'Login' button, and a link for 'Forgot your Username or Password?'. Below the login box, there are tabs for 'Licensee', 'Provider', and 'Non-Licensees and Potential Providers'. The 'Licensee' tab is selected, showing a 'Licensee' section with a link to a tutorial and a prominent red link to 'REGISTER FOR THIS SITE:'. A bullet point indicates that users already licensed with the Division of Funeral, Cemetery and Consumer Services should register on their first visit. At the bottom, contact information is provided for the Department of Financial Services, and a copyright notice for 2000-2022 is at the very bottom.

Locate Apply Help public

Welcome

To expedite your renewal, please verify in your profile that all Continuing Education classes have been completed and uploaded prior to completing the renewal payment.

Thank you for accessing the Department of Financial Services' Division of Funeral, Cemetery and Consumer Services Licensee Database. The system is operational, 7 days a week from 7:00 AM until midnight.

Licensee Provider Non-Licensees and Potential Providers

Licensee

[CLICK HERE](#) to view the tutorial on how to navigate this site.

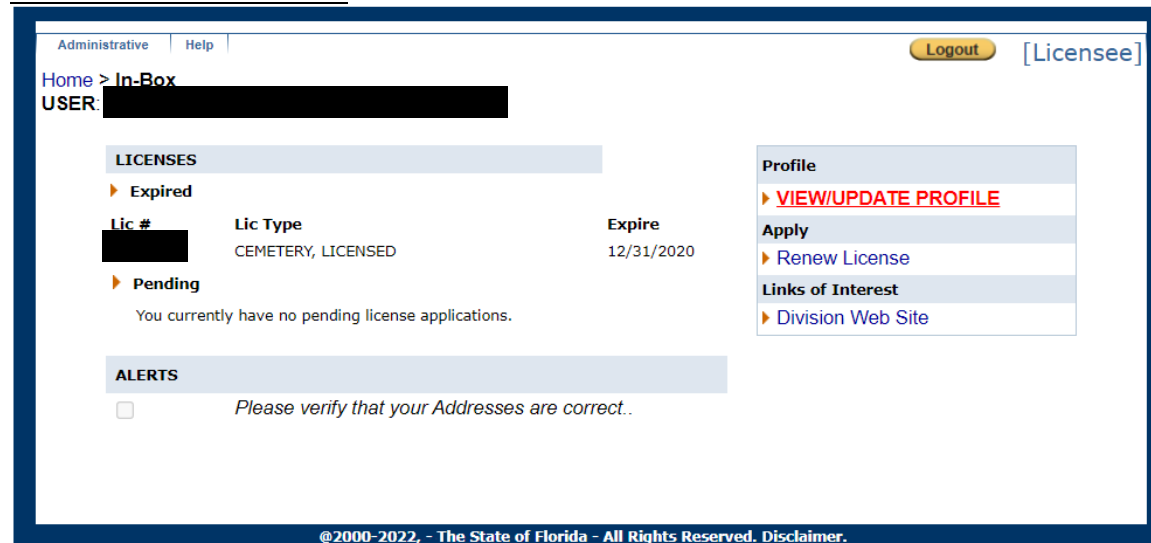
PLEASE [CLICK HERE](#) TO REGISTER FOR THIS SITE:

- Already licensed with the Division of Funeral, Cemetery and Consumer Services, but this your first visit to our site.

If you encounter any problems while using this system, please contact the Department Monday - Friday between the hours of 8:00 am and 5:00 pm at 850-413-3039.

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Click "Renew License" link.



The screenshot shows the FACS-DICE Licensee Dashboard. At the top, there are navigation links: 'Administrative' and 'Help'. A 'Logout' button and a '[Licensee]' label are in the top right. The breadcrumb trail shows 'Home > In-Box' and 'USER: [redacted]'. The main content area is divided into three sections: 'LICENSES', 'Profile', and 'ALERTS'. The 'LICENSES' section has tabs for 'Expired' and 'Pending'. Under 'Expired', there is a table with columns 'Lic #', 'Lic Type', and 'Expire'. The table shows one license: 'CEMETERY, LICENSED' expiring on '12/31/2020'. Under 'Pending', it states 'You currently have no pending license applications.' The 'Profile' section has a 'VIEW/UPDATE PROFILE' link, an 'Apply' button, a 'Renew License' link, and a 'Division Web Site' link. The 'ALERTS' section has a checkbox and the text 'Please verify that your Addresses are correct..'. At the bottom, there is a copyright notice for 2000-2022.

Administrative Help Logout [Licensee]

Home > In-Box
USER: [redacted]

LICENSES

Expired

Lic #	Lic Type	Expire
[redacted]	CEMETERY, LICENSED	12/31/2020

Pending

You currently have no pending license applications.

Profile

[VIEW/UPDATE PROFILE](#)

Apply

[Renew License](#)

Links of Interest

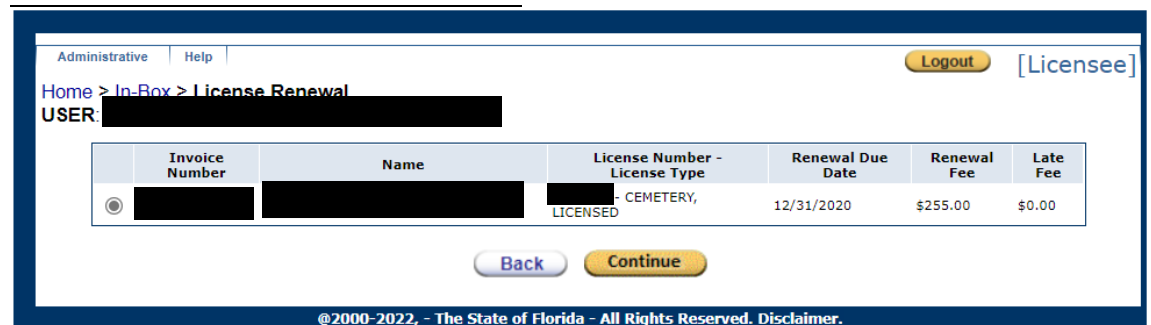
[Division Web Site](#)

ALERTS

☐ Please verify that your Addresses are correct..

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Select invoice and click "Continue" button.



The screenshot shows the FACS-DICE License Renewal page. At the top, there are navigation links: 'Administrative' and 'Help'. A 'Logout' button and a '[Licensee]' label are in the top right. The breadcrumb trail shows 'Home > In-Box > License Renewal' and 'USER: [redacted]'. The main content area features a table with columns: 'Invoice Number', 'Name', 'License Number - License Type', 'Renewal Due Date', 'Renewal Fee', and 'Late Fee'. The table has one row with the following data: Invoice Number [redacted], Name [redacted], License Number - License Type [redacted] - CEMETERY, LICENSED, Renewal Due Date 12/31/2020, Renewal Fee \$255.00, and Late Fee \$0.00. Below the table are 'Back' and 'Continue' buttons. At the bottom, there is a copyright notice for 2000-2022.

Administrative Help Logout [Licensee]

Home > In-Box > License Renewal
USER: [redacted]

Invoice Number	Name	License Number - License Type	Renewal Due Date	Renewal Fee	Late Fee
[redacted]	[redacted]	[redacted] - CEMETERY, LICENSED	12/31/2020	\$255.00	\$0.00

[Back](#) [Continue](#)

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Click "Continue" button.

Verify and update phone and/or fax number and click on "Continue" button.

Enter requested information and click "Continue" button.

Application Advise

Profile Update

Background Questions

Application Review

Affirmation

Checkout

Summary

Background Questions

Your cemetery license [REDACTED] must be renewed on or before 12/31/2020. The requirement for annual renewal and the amount of the renewal fee is specified in s.497.265, Florida Statutes.

The renewal fee is based on the cemetery's gross sales for a 12 month period. The attached information sheet shows the statutory renewal fee schedule and additional instructions:

Please provide the gross sales information for the 12 month period.

You are reporting gross sales for the 12-month period ending on (enter date): (mm/dd/yyyy)

Gross sales for that 12-month period: \$

Renewal fee amount: \$

(from reported gross sales)

LATE FEE:
Payment will be deemed late if not actually received on or before 12/31/2020, unless payment is made by U.S. mail and the envelope bears a U.S. postmark date of 12/31/2020 or earlier. Late payment will result in imposition of a late fee of \$200.00 per each month or fraction thereof late.

CALCULATION INFORMATION
Pursuant to section 497.265, Florida Statutes, your annual cemetery license renewal fee is based on the annual gross sales of the cemetery during the preceding twelve-month fiscal period.

RENEWAL FEE SCHEDULE

If gross sales were in this range	Then renewal fee is
\$0 thru \$24,999	\$255.00
\$25,000 thru \$99,999	\$355.00
\$100,000 thru \$249,999	\$605.00
\$250,000 thru \$499,999	\$905.00
\$500,000 thru \$749,999	\$1,355.00
\$750,000 thru \$999,999	\$2,255.00
\$1,000,000 thru \$4,999,999	\$3,255.00
\$5,000,000 and over	\$4,905.00

2.1.60345
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Enter requested information and click "Continue" button.

Select "Yes" or "No answer" and click "Continue" button.

Click "Continue" button.

Application Advise	Profile Update	Background Questions	Application Review	Affirmation	Checkout	Summary
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APPLICATION REVIEW

PRINT

After you have confirmed that the application is complete and correct, we recommend that you print this page for your records. Please review the data and answers entered so far. If any are incorrect, you will need to restart this application process.

CAUTION--This screen does NOT complete the on-line application process. There are additional screens to process before your application is deemed complete.

Florida Department of Financial Services

Division of Funeral, Cemetery & Consumer Services

APPLICANT INFORMATION

FEIN Number: [REDACTED]

Applicant's Name: [REDACTED]

Contact Information

Mailing Address: [REDACTED]

Contact Phone: [REDACTED] Secondary Phone: [REDACTED] Email Address: [REDACTED]

FEE SUMMARY

Renewal License(s) Applied For:	34-00 - Cemetery License
Application ID Number:	[REDACTED]
Invoice Number:	[REDACTED]
License Number:	[REDACTED]
Renewal Fee	\$250.00
Unlicensed Activity Fee	\$5.00
Total Fees Due:	\$255.00

Application to Renew License

APPLICANT INFORMATION

FEIN Number:	[REDACTED]	Invoice Number:	[REDACTED]
Applicant's Name:	[REDACTED]	Application ID:	[REDACTED]
License Number:	[REDACTED]		
Mailing Address:	[REDACTED]		
Business Location Address:	[REDACTED]		
Contact Phone:	[REDACTED]	Secondary Phone:	[REDACTED]
	[REDACTED]	Email Address:	[REDACTED]

LICENSE INFORMATION

Renewal License(s) Applied For:	34-00 - Cemetery License
---------------------------------	--------------------------

FEE INFORMATION

Renewal Fee	\$250.00
Unlicensed Activity Fee	\$5.00
Total Fees Due:	\$255.00

(Continued on next page)

BACKGROUND QUESTIONS

Pursuant to section 497.141(5)(a), Florida Statutes, answer the following questions:

Has the licensee or any of its principal been convicted of, pled nolo contendere to, or pled guilty to, any crime required to be reported pursuant to Section 497.142(10), Florida Statutes, that was not previously disclosed to the Department upon initial application or the most recent renewal?

If you have previously reported the criminal record to the Division of Funeral, Cemetery and Consumer Services when applying for or previously renewing the license, you are NOT required to disclose it again and you may check NO below.

The following crimes must be reported pursuant to section 497.142(10)(c), Florida Statutes:

1. Any felony no matter when committed
2. Any misdemeanor, no matter when committed, that was directly related to the practice or activities regulated under chapter 497, F.S.
3. Any other misdemeanor not already disclosed under subparagraph b. that was committed within the five (5) years immediately preceding the date this application is submitted.

"Principal" is defined as follows (see section 497.005(58), Florida Statutes) "Principal" means and includes the sole proprietor of a sole proprietorship; all partners of a partnership; all members of a limited liability company; regarding a corporation, all directors and officers, and all stockholders controlling more than 10 percent of the voting stock; and all other persons who can exercise control over the person or entity.

Yes/No

No

Please provide the gross sales information for the 12 month period.	
You are reporting gross sales for the 12-month period ending on (enter date):	07/31/2022
Please provide the gross sales information for the 12 month period.	
Gross sales for that 12-month period:	5001
Please provide the gross sales information for the 12 month period.	
Renewal fee amount:	255.00
Please enter your contact person's name, phone number and email address below.	
Contact person's name:	Test Application
Please enter your contact person's name, phone number and email address below.	
Phone # with area code:	(850)413-1577
Please enter your contact person's name, phone number and email address below.	
Email:	test@yahoo.com
DEFICIENCIES	
EXIT CONTINUE	
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Enter name and click "Continue" button.

The screenshot shows the 'AFFIRMATION' step of the application process. At the top, a navigation bar includes 'Application Advise', 'Profile Update', 'Background Questions', 'Application Review', 'Affirmation' (highlighted), 'Checkout', and 'Summary'. Below the navigation bar is the title 'APPLICATION' and a 'PRINT' button. The main content area contains a paragraph asking the user to complete the following to indicate whether the information and answers provided in this on-line application is true and correct. Please type in the certifying person's name, and press Continue. A red 'CAUTION' message states: 'This screen does NOT complete the on-line application process. There are several more screens after this screen.' Below this is a warning paragraph: 'Whoever knowingly given false information in the course of applying for or obtaining a license under this chapter, with intent to mislead the board or a public employee in the performance of her or his official duties, or the act of attempting to obtain or obtaining a license under this chapter by knowingly misleading statements or knowing misrepresentations, constitutes a felony of the third degree.' This is followed by a declaration paragraph: 'Under penalties of perjury, I declare that I have read the foregoing application for license and that the facts stated in it are true. I understand that misrepresentation of any fact required to be disclosed through this application is a violation of the Florida Statute 497.152 (4)(f)(g)(h) may result in the denial of your renewal application and/or the revocation of my Funeral Industry licenses(s). I understand that, per 497 Florida Statutes, all application fees are non-refundable' Below the declaration is a text input field labeled 'Last, First Name:' with the value 'My Test'. At the bottom are three buttons: 'EXIT', 'BACK', and 'CONTINUE'. The footer contains 'DFS-H2-2022' and '@2000-2022, The State of Florida - All Rights Reserved.'

Application Advise Profile Update Background Questions Application Review **Affirmation** Checkout Summary

APPLICATION

PRINT

Please complete the following to indicate whether the information and answers provided in this on-line application is true and correct. Please type in the certifying person's name, and press Continue.

CAUTION-This screen does NOT complete the on-line application process. There are several more screens after this screen.

Whoever knowingly given false information in the course of applying for or obtaining a license under this chapter, with intent to mislead the board or a public employee in the performance of her or his official duties, or the act of attempting to obtain or obtaining a license under this chapter by knowingly misleading statements or knowing misrepresentations, constitutes a felony of the third degree.

Under penalties of perjury, I declare that I have read the foregoing application for license and that the facts stated in it are true. I understand that misrepresentation of any fact required to be disclosed through this application is a violation of the Florida Statute 497.152 (4)(f)(g)(h) may result in the denial of your renewal application and/or the revocation of my Funeral Industry licenses(s).

I understand that, per 497 Florida Statutes, all application fees are non-refundable

Last, First Name:

EXIT **BACK** **CONTINUE**

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Select "Mail in Payment" and click "Continue" button.

The screenshot shows the 'CHECKOUT' step of the application process. At the top, a navigation bar includes 'Application Advise', 'Profile Update', 'Background Questions', 'Application Review', 'Affirmation', 'Checkout' (highlighted), and 'Summary'. Below the navigation bar is the title 'CHECKOUT'. The main content area contains a red message: 'Please select payment type below, then continue.' Below this is a form with labels 'Name:', 'FEIN:', and 'Mailing Address:' followed by a blacked-out area. Below this is a table with the following data:

Renewal License(s) Applied For:	License Type(s)	Count
	34-00 - Cemetery License	1

Below the table is a section for 'Itemized Fees:' with a 'Total Amount Due:' of '\$255.00'. Below this is a 'Pay By:' section with three radio button options: 'Credit Card (Discover, Mastercard, American Express)', 'E-Check', and 'Mail in Payment' (which is selected). At the bottom are three buttons: 'EXIT', 'BACK', and 'CONTINUE'. The footer contains 'DFS-H2-2022' and '@2000-2022, The State of Florida - All Rights Reserved.'

Application Advise Profile Update Background Questions Application Review Affirmation **Checkout** Summary

CHECKOUT

Please select payment type below, then continue.

Name:
FEIN:
Mailing Address:

Renewal License(s) Applied For:	License Type(s)	Count
	34-00 - Cemetery License	1

Itemized Fees: Total Amount Due: \$255.00

Pay By: ☐ Credit Card (Discover, Mastercard, American Express)
☐ E-Check
☒ Mail in Payment

EXIT **BACK** **CONTINUE**

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Select "OK".

**JIMMY P
FLORIDA**

facsaalfdev.fldfs.com says

You have selected to print a paper copy of your renewal and mail it to the Division of Funeral & Cemetery Service.

If you click OK you will no longer have the option to pay your renewal electronically AND an additional 'Paper Processing Fee' of \$25 per license will be added to the cost of your renewal.

The printed renewal invoice will have the address and instructions on how to complete your renewal. To continue with this action click OK.

If you would like To renew online, please click CANCEL below and

OK

Cancel

Application
Advise

Pr
U

Logout

Summary

Renewal License(s) Applied For:

License Type(s)
34-00 - Cemetery License

Count
1

Itemized Fees:

Total Amount Due:

\$255.00

Pay By:

☐ Credit Card (Discover, Mastercard, American Express)

☐ E-Check

☒ Mail in Payment

EXIT

BACK

CONTINUE

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Click "Continue" button.

Application Advise	Profile Update	Background Questions	Application Review	Affirmation	Checkout ▲	Summary
-----------------------	-------------------	-------------------------	-----------------------	-------------	---------------	---------

PAYMENT

PRINT

Florida Department of Financial Services
Division of Funeral, Cemetery & Consumer Services

APPLICANT INFORMATION

FEIN Number:
[REDACTED]

Applicant's Name:
[REDACTED]

Contact Information

Mailing Address
[REDACTED]

Contact Phone	Secondary Phone	Email Address
[REDACTED]		

FEE SUMMARY

Renewal License(s) Applied For: 34-00 - Cemetery License

Application ID Number:	Invoice Number:	License Number:
[REDACTED]		

Renewal Fee	\$250.00
Unlicensed Activity Fee	\$5.00
Paper Processing Fee	\$25.00
Total Fees Due:	\$280.00

Florida Department of Financial Services
Division of Funeral, Cemetery & Consumer Services
Invoice to Renew License

Please read and follow all instructions carefully.
August 16, 2022

Invoice Number: [REDACTED]

[REDACTED]

DEAR LICENSEE:

This is an informational notice to inform you that it is time to renew your license identified below for another 2-year period. **To renew your license please complete all sections of the attached license renewal application and return with payment by DECEMBER 31, 2020** or your license will be delinquent.

If you are **NOT** renewing your license, please notify the Division of Funeral, Cemetery and Consumer Services in writing upon receipt of this notice. If you fail to timely renew your license by **DECEMBER 31, 2020**, your license becomes delinquent. Without a valid license, you must cease and desist from engaging in any activity for which you must be licensed. Any license that remains in delinquent status for an entire two-year license cycle becomes null and void and any subsequent licensure shall be only as a result of applying for and meeting all requirements imposed on an applicant for new licensure pursuant to section 497.365 (6), Florida Statutes.

Please note that you will **NOT** receive further reminders from the Department concerning the renewal of this license.

License Type: **Cemetery License**

(Continued on next page)

License Type: **Cemetery License**
License Number: [REDACTED]
Renewal Fee: **\$280.00**
(Renewal Fee after **DECEMBER** [REDACTED]: **\$480.00**)

The process of renewing a license by mail may take two (2) to four (4) weeks. Please **allow sufficient time** before calling to confirm the receipt of fees or the status of your license. You may find additional information concerning your profession at: www.myfloridacfo.com/division/FuneralCemetery/. If you have questions, call the Division office at 850-413-3039.

To renew license, mail a copy of this completed renewal application with your check or money order payable to:

Department of Financial Services
Attn: Revenue Processing Section
P.O. Box 6100
Tallahassee, Florida 32314-6100

LICENSE RENEWAL APPLICATION

APPLICANT INFORMATION

SSN: [REDACTED] Date Of Birth [REDACTED] Invoice Number: [REDACTED]

Applicant's Name: [REDACTED] Application ID: [REDACTED]

License Number: [REDACTED]

Mailing Address [REDACTED]

Home Address [REDACTED]

Contact Phone [REDACTED]

Email Address [REDACTED]

FEE INFORMATION

Renewal Fee Unlicensed
Activity Fee Paper
Processing Fee [REDACTED]

Total Fees Due: [REDACTED]

BACKGROUND QUESTIONS

Pursuant to section 497.141(5)(a), Florida Statutes, answer the following questions:

Has the licensee or any of its principal been convicted of, pled nolo contendere to, or pled guilty to, any crime required to be reported pursuant to Section 497.142(10), Florida Statutes, that was not previously disclosed to the Department upon initial application or the most recent renewal?

If you have previously reported the criminal record to the Division of Funeral, Cemetery and Consumer Services when applying for or previously renewing the license, you are NOT required to disclose it again and you may check NO below.

The following crimes must be reported pursuant to section 497.142(10)(c), Florida Statutes:

- Any felony no matter when committed
- Any misdemeanor, no matter when committed, that was directly related to the practice or activities regulated under chapter 497, F.S.
- Any other misdemeanor not already disclosed under subparagraph b. that was committed within the five (5) years immediately preceding the date this application is submitted.

"Principal" is defined as follows (see section 497.005(58), Florida Statutes) "Principal" means and includes the sole proprietor of a sole proprietorship; all partners of a partnership; all members of a limited liability company; regarding a corporation, all directors and officers, and all stockholders controlling more than 10 percent of the voting stock; and all other persons who can exercise control over the person or entity.

Yes/No

No

Please provide the gross sales information for the 12 month period.	
You are reporting gross sales for the 12-month period ending on (enter date):	07/31/2022
Please provide the gross sales information for the 12 month period.	
Gross sales for that 12-month period:	5001
Please provide the gross sales information for the 12 month period.	
Renewal fee amount:	255.00
Please enter your contact person's name, phone number and email address below.	
Contact person's name:	Test Application
Please enter your contact person's name, phone number and email address below.	
Phone # with area code:	(850)413-1577
Please enter your contact person's name, phone number and email address below.	
Email:	test@yahoo.com

DEFICIENCIES

EXIT

CONTINUE

DFS-H2-2022

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Appendix

Pages 9 and 21

The dropdown menu for “Country” provides the following options:

<u>Afghanistan</u>	<u>Cambodia</u>	<u>Finland</u>	<u>Jersey</u>
<u>Aland Islands</u>	<u>Cameroon</u>	<u>France</u>	<u>Jordan</u>
<u>Albania</u>	<u>Canada</u>	<u>French Guiana</u>	<u>Kazakhstan</u>
<u>Algeria</u>	<u>Cape Verde</u>	<u>French Polynesia</u>	<u>Kenya</u>
<u>American Samoa</u>	<u>Cayman Islands</u>	<u>French Southern Territories</u>	<u>Kiribati</u>
<u>Andorra</u>	<u>Central African Republic</u>	<u>Gabon</u>	<u>Korea, Democratic People's Republic of</u>
<u>Angola</u>	<u>Chile</u>	<u>Gambia</u>	<u>Korea, Republic of</u>
<u>Anguilla</u>	<u>China</u>	<u>Georgia</u>	<u>Kuwait</u>
<u>Antarctica</u>	<u>Christmas Island</u>	<u>Germany</u>	<u>Kyrgyzstan</u>
<u>Antigua and Barbuda</u>	<u>Cocos (Keeling) Islands</u>	<u>Ghana</u>	<u>Lao People's Democratic Republic</u>
<u>Argentina</u>	<u>Comoros</u>	<u>Gibraltar</u>	<u>Latvia</u>
<u>Armenia</u>	<u>Congo</u>	<u>Greece</u>	<u>Lebanon</u>
<u>Aruba</u>	<u>Congo, the Democratic Republic of the</u>	<u>Greenland</u>	<u>Lesotho</u>
<u>Australia</u>	<u>Cook Islands</u>	<u>Grenada</u>	<u>Liberia</u>
<u>Austria</u>	<u>Costa Rica</u>	<u>Guadeloupe</u>	<u>Libya</u>
<u>Azerbaijan</u>	<u>Côte d'Ivoire</u>	<u>Guam</u>	<u>Liechtenstein</u>
<u>Bahamas</u>	<u>Croatia</u>	<u>Guatemala</u>	<u>Lithuania</u>
<u>Bahrain</u>	<u>Cuba</u>	<u>Guernsey</u>	<u>Luxembourg</u>
<u>Bangladesh</u>	<u>Curaçao</u>	<u>Guinea</u>	<u>Macao</u>
<u>Barbados</u>	<u>Cyprus</u>	<u>Guinea-Bissau</u>	<u>Macedonia, the former Yugoslav Republic of</u>
<u>Belarus</u>	<u>Czech Republic</u>	<u>Guyana</u>	<u>Malawi</u>
<u>Belgium</u>	<u>Denmark</u>	<u>Haiti</u>	<u>Malaysia</u>
<u>Belize</u>	<u>Djibouti</u>	<u>Heard Island and McDonald Islands</u>	<u>Maldives</u>
<u>Benin</u>	<u>Dominica</u>	<u>Holy See (Vatican City State)</u>	<u>Mali</u>
<u>Bermuda</u>	<u>Dominican Republic</u>	<u>Honduras</u>	<u>Malta</u>
<u>Bhutan</u>	<u>Ecuador</u>	<u>Hong Kong</u>	<u>Marshall Islands</u>
<u>Bolivia, Plurinational State of</u>	<u>Egypt</u>	<u>Hungary</u>	<u>Martinique</u>
<u>Bonaire, Sint Eustatius and Saba</u>	<u>El Salvador</u>	<u>Iceland</u>	<u>Mauritania</u>
<u>Bosnia and Herzegovina</u>	<u>Equatorial Guinea</u>	<u>India</u>	<u>Mauritius</u>
<u>Botswana</u>	<u>Eritrea</u>	<u>Indonesia</u>	<u>Mayotte</u>
<u>Bouvet Island</u>	<u>Estonia</u>	<u>Iran, Islamic Republic of</u>	<u>Mexico</u>
<u>Brazil</u>	<u>Ethiopia</u>	<u>Iraq</u>	<u>Micronesia, Federated States of</u>
<u>British Indian Ocean Territory</u>	<u>Falkland Islands</u>	<u>Ireland</u>	
<u>Brunei Darussalam</u>	<u>Maldives</u>	<u>Isle of Man</u>	
<u>Bulgaria</u>	<u>Maldives</u>	<u>Israel</u>	
<u>Burundi</u>	<u>Fiji</u>	<u>Italy</u>	
		<u>Jamaica</u>	
		<u>Japan</u>	

<u>Moldova,</u>
<u>Republic of</u>
<u>Monaco</u>
<u>Mongolia</u>
<u>Montenegro</u>
<u>Montserrat</u>
<u>Morocco</u>
<u>Mozambique</u>
<u>Myanmar</u>
<u>Namibia</u>
<u>Nauru</u>
<u>Nepal</u>
<u>Netherlands</u>
<u>New Caledonia</u>
<u>New Zealand</u>
<u>Nicaragua</u>
<u>Niger</u>
<u>Nigeria</u>
<u>Niue</u>
<u>Norfolk Island</u>
<u>Northern</u>
<u>Mariana Islands</u>
<u>Norway</u>
<u>Oman</u>
<u>Pakistan</u>
<u>Palau</u>
<u>Palestine,</u>
<u>State of</u>
<u>Panama</u>
<u>Papua New</u>
<u>Guinea</u>
<u>Paraguay</u>
<u>Peru</u>
<u>Philippines</u>

<u>Pitcairn</u>
<u>Poland</u>
<u>Portugal</u>
<u>Puerto Rico</u>
<u>Qatar</u>
<u>Réunion</u>
<u>Romania</u>
<u>Russian</u>
<u>Federation</u>
<u>Rwanda</u>
<u>Saint Barthélemy</u>
<u>Saint Helena,</u>
<u>Ascension and</u>
<u>Tristan da Cunha</u>
<u>Saint Kitts</u>
<u>and Nevis</u>
<u>Saint Lucia</u>
<u>Saint Martin</u>
<u>(French part)</u>
<u>Saint Pierre</u>
<u>and Miquelon</u>
<u>Saint</u>
<u>Vincent and</u>
<u>the</u>
<u>Samoa</u>
<u>Samoa</u>
<u>San Marino</u>
<u>Sao Tome</u>
<u>and Principe</u>
<u>Saudi Arabia</u>
<u>Senegal</u>
<u>Serbia</u>
<u>Seychelles</u>
<u>Sierra Leone</u>
<u>Singapore</u>

<u>Sint Maarten</u>
<u>(Dutch part)</u>
<u>Slovakia</u>
<u>Slovenia</u>
<u>Solomon Islands</u>
<u>Somalia</u>
<u>South Africa</u>
<u>South Georgia</u>
<u>and the South</u>
<u>Sandwich Islands</u>
<u>South Sudan</u>
<u>Spain</u>
<u>Sri Lanka</u>
<u>Sudan</u>
<u>Suriname</u>
<u>Svalbard and</u>
<u>Jan Mayen</u>
<u>Swaziland</u>
<u>Sweden</u>
<u>Switzerland</u>
<u>Syrian Arab</u>
<u>Republic</u>
<u>Taiwan,</u>
<u>Province of</u>
<u>Tajikistan</u>
<u>Tanzania,</u>
<u>United Republic</u>
<u>of</u>
<u>Thailand</u>
<u>Timor-Leste</u>
<u>Togo</u>
<u>Tokelau</u>
<u>Tonga</u>
<u>Trinidad and</u>
<u>Tobago</u>

<u>Tunisia</u>
<u>Turkey</u>
<u>Turkmenistan</u>
<u>Turks and</u>
<u>Caicos Islands</u>
<u>Tuvalu</u>
<u>Uganda</u>
<u>Ukraine</u>
<u>United Arab</u>
<u>Emirates</u>
<u>United Kingdom</u>
<u>United States</u>
<u>United States</u>
<u>Minor</u>
<u>Outlying</u>
<u>Islands</u>
<u>Uzbekistan</u>
<u>Vanuatu</u>
<u>Venezuela,</u>
<u>Bolivarian</u>
<u>Republic of</u>
<u>Viet Nam</u>
<u>Virgin</u>
<u>Islands,</u>
<u>British</u>
<u>Islands, U.S.</u>
<u>Wallis and</u>
<u>Futuna</u>
<u>Western Sahara</u>
<u>Yemen</u>
<u>Zambia</u>
<u>Zimbabwe</u>

The dropdown menu for “State” provides the following options:

<u>AA - Armed Forces Americas</u>	<u>IN - Indiana</u>	<u>ND - North Dakota</u>
<u>AE - Armed Forces Europe</u>	<u>IA - Iowa</u>	<u>MP - Northern Mariana Islands</u>
<u>AP - Armed Forces Pacific</u>	<u>KS - Kansas</u>	<u>OH - Ohio</u>
<u>AL – Alabama</u>	<u>KY - Kentucky</u>	<u>OK - Oklahoma</u>
<u>AK – Alaska</u>	<u>LA - Louisiana</u>	<u>OR - Oregon</u>
<u>AS - American Samoa</u>	<u>ME - Maine</u>	<u>PW - Palau</u>
<u>AZ – Arizona</u>	<u>MH - Marshall Islands</u>	<u>PA - Pennsylvania</u>
<u>AR – Arkansas</u>	<u>MD - Maryland</u>	<u>PR - Puerto Rico</u>
<u>CA - California</u>	<u>MA - Massachusetts</u>	<u>RI - Rhode Island</u>
<u>CO - Colorado</u>	<u>MI - Michigan</u>	<u>SC - South Carolina</u>
<u>CT - Connecticut</u>	<u>MN - Minnesota</u>	<u>SD - South Dakota</u>
<u>DE - Delaware</u>	<u>MS - Mississippi</u>	<u>TN - Tennessee</u>
<u>DC - District of Columbia</u>	<u>MO - Missouri</u>	<u>TX - Texas</u>
<u>FM - Federated States of Micronesia</u>	<u>MT - Montana</u>	<u>UT - Utah</u>
<u>FL - Florida</u>	<u>NE - Nebraska</u>	<u>VT - Vermont</u>
<u>GA - Georgia</u>	<u>NV - Nevada</u>	<u>VI - Virgin Islands</u>
<u>GU - Guam</u>	<u>NH - New Hampshire</u>	<u>VA - Virginia</u>
<u>HI - Hawaii</u>	<u>NJ - New Jersey</u>	<u>WA - Washington</u>
<u>ID - Idaho</u>	<u>NM - New Mexico</u>	<u>WV - West Virginia</u>
<u>IL - Illinois</u>	<u>NY - New York</u>	<u>WI – Wisconsin</u>
	<u>NC - North Carolina</u>	<u>WY - Wyoming</u>

The dropdown for “Expiration Month” provides the following options:

<u>01 – January</u>
<u>02 – February</u>
<u>03 – March</u>
<u>04 – April</u>
<u>05 – May</u>
<u>06 – June</u>
<u>07 – July</u>
<u>08 – August</u>
<u>09 – September</u>
<u>10 – October</u>
<u>11 – November</u>
<u>12 – December</u>

The dropdown for “Expiration Year” provides the following options:

<u>2024</u>
<u>2025</u>
<u>2026</u>
<u>2027</u>
<u>2028</u>
<u>2029</u>
<u>2030</u>
<u>2031</u>
<u>2032</u>
<u>2033</u>
<u>2034</u>
<u>2035</u>
<u>2036</u>
<u>2037</u>
<u>2038</u>
<u>2039</u>
<u>2040</u>
<u>2041</u>
<u>2042</u>
<u>2043</u>
<u>2044</u>

The dropdown for Payment Type provides the following options:

<u>Credit/Debit Card</u>
<u>Electronic Check</u>