



DEPARTMENT OF FINANCIAL SERVICES
Division of Funeral, Cemetery, and Consumer
Services 200 East Gaines Street
Tallahassee, FL 32399-0361

Notice of Change in Location of Monument Establishment

Under Section 497.553, F.S.

NONREFUNDABLE REQUIRED FEE: \$250

This form is for reporting a change in location of a monument establishment, and requesting an inspection of the proposed new location. This form is NOT used to report a change in ownership of a monument establishment. This form must be filed **BEFORE** the new location is ready for inspection.

Operations at the new location shall NOT commence until an inspection of the new location by the Division of Funeral, Cemetery, and Consumer Services is conducted and passed.

<u>1. Name of monument establishment as shown on license:</u>	
<u>2. License number of monument establishment:</u>	
<u>3. Current address of monument establishment (street, city, state, zip):</u>	
<u>4. Proposed new address (street, city, state, zip):</u>	
<u>5. Date the new location will be ready for inspection:</u>	
<u>6. Name of establishment representative:</u>	
<u>7. Phone number of establishment representative:</u>	
<u>8. Signature:</u>	
<u>I certify that the above information is true to the best of my belief.</u>	
<u>Signature of Monument Establishment Representative</u>	<u>Date Signed</u>
<u>Mail completed application with all attachments and required fees to:</u>	
<u>Division of Funeral, Cemetery, and Consumer Services</u>	
<u>Revenue Processing Office</u>	
<u>P.O. Box 6100</u>	
<u>Tallahassee, FL 32314-6100</u>	

DFS RECEIPTS SECTION

<u>BT</u>	<u>TYCL</u>	<u>FT</u>	
<u>V</u>	<u>2600</u>	<u>E</u>	<u>\$225</u>
	<u>3801</u>	<u>F</u>	<u>\$ 25</u>