

**CREMATORY OPERATOR IN CHARGE TRANSFER APPLICATION FOR A
KANSAS CREMATORY LICENSE**

To be used when a crematory operator in charge change occurs at an already licensed Kansas Crematory.

COMPLETE AND RETURN ALONG WITH A \$15.00 DUPLICATE LICENSE FEE WHEN APPLYING FOR A CREMATORY LICENSE. Crematory licenses are only granted to crematory operators in charge of the crematory.

Name of Crematory (doing business as) as you want it to appear on the license:

Street Address: _____ County: _____

City: _____ State: **KANSAS** Zip+4: _____ - _____

Mailing Address (if different than street address): _____

Telephone Number: (____) _____ FAX Number: (____) _____

Email address: _____ Home/Web page address: _____

PLEASE NOTE: All limited partnerships & corporations must be duly registered with the Secretary of State and Registrar of Deeds for the appropriate county. **ALL FEES ARE NOT REFUNDABLE**

Please check one:

Corporation ___ Limited Partnership ___ Proprietorship ___ Partnership ___ Limited Liability Company ___

Provide the name of the corporation, limited liability company, partnership or persons that will own this facility:

List all Owners or Corporate Officers with their appropriate titles (can be submitted separately if necessary):

NAME OF CREMATORY OPERATOR IN CHARGE: _____

Effective Date: _____

(The date in which the new crematory operator will become in charge of the crematory.)

THE CREMATORY OPERATOR IN CHARGE NEEDS TO REVIEW AND SIGN THE BACK OF THIS APPLICATION BEFORE IT CAN BE PROCESSED.

FOR OFFICE USE ONLY

Date Application Received: _____ **Date License Mailed:** _____

(OVER)

****Revised January 6, 2005****

PLEASE READ AND CAREFULLY ANSWER EACH QUESTION IN THIS SECTION

THIS APPLICATION WILL NOT BE PROCESSED UNTIL YOU SIGN AND DATE THE FORM AND SUBMIT THE REQUIRED DOCUMENTATION

K.S.A. 65-1751 provides that the Board may refuse to issue or renew a license, may condition, limit, revoke or suspend a license or may publicly or privately censure, or may impose a fine on a licensee not to exceed \$1,000 per violation, upon a finding that an applicant or licensee has engaged in certain conduct.

K.S.A. 65-1766 provides that the Board may refuse to issue or renew a license or revoke, condition, limit, censure, fine or suspend a license for the crematory or crematory operator upon a finding that a crematory operator or the crematory operator in charge has engaged in certain conduct.

As used in this application, "license" means an embalmer's license, funeral director's license, assistant funeral director's license, establishment license, branch license, crematory license or crematory operator's license. Please mark "Yes" or "No" as applicable. Misleading, deceptive, untrue or fraudulent statements made in applying for or securing an original or renewal license may be grounds for denial of the license.

YOU MUST ATTACH A WRITTEN EXPLANATION FOR EACH "YES" ANSWER.

1. Have you ever been convicted of a felony? YES _____ NO _____
If you checked YES, in addition to a written explanation, you must also attach a copy of Journal Entry of Conviction, Journal Entry of Sentencing, and the Parole or Post Release Supervision Certificate and Conditions.
2. Have you ever violated any law, ordinance, or rule and regulation affecting the handling, custody, care or transportation of dead human bodies or cremated remains? YES _____ NO _____
3. Have you ever had a license denied, revoked or suspended, subject to censure or fine or has any other disciplinary action been taken against you by this Board or the licensing authority of any other state, jurisdiction, territory, the District of Columbia or any other country? YES _____ NO _____
4. Have you ever failed to report to the Board any adverse disciplinary action taken against you by another state or licensing jurisdiction, a professional association or society, a governmental agency, a law enforcement agency, or a court? YES _____ NO _____
5. Have you ever had an adverse judgment, award or settlement taken against you resulting from the practice of funeral directing, embalming or cremation, or failed to report such matter to the Board? YES _____ NO _____
6. Have you ever been found guilty of negligence, incompetence, fraud, misrepresentation or deceit in connection with services rendered as a licensee? YES _____ NO _____
7. Do you have any pending criminal charges or civil / administrative actions that have been filed against you, or are in the process of being investigated or filed, related to any of the above situations? YES _____ NO _____

FOR RENEWALS ONLY:

_____ Check here if any of the above situations for which you checked "YES" occurred since your last renewal.

NOTICE TO ALL COMPLETING THIS FORM: (1) If you submit this application before you are eligible for a license or before your license renewal date, you must notify the Board if any of the above situations occur while this application is pending and until a license is granted, or until your license renewal date.

(2) If you checked YES on any question, in addition to a written YES explanation, you must also submit documentation that explains each YES answer, including court records; court orders, journal entries, or judgments, administrative findings; and the like. YOUR APPLICATION CANNOT BE PROCESSED UNTIL THE REQUIRED DOCUMENTATION IS SUBMITTED.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Applicant / Licensee County Social Security Number Date

K.S.A. 74-139 provides that upon request from the director of taxation, the Board must provide a listing of all applicants, their SSN, and address.