



**ARKANSAS INSURANCE DEPARTMENT
FUNERAL SERVICES DIVISION | EMBALMERS & FUNERAL DIRECTORS**

**MANAGER CHANGE / ACCEPTANCE OF MANAGER POSITION | Type C
Establishment**

**RULE 1. Section 6 – FUNERAL ESTABLISHMENTS, C. FUNERAL ESTABLISHMENT TYPE C –
CREMATORY**

1. A crematory is an agent of a Type A establishment and as such does not make arrangements with the public. Applicants seeking Type C licensure must meet the following minimum requirements:

13. Each funeral establishment Type C shall have a full-time licensed funeral director to serve as manager.

G. Crematory Retort Operator

7. Prior to operating a retort, the operator shall become licensed. Every crematory retort operator shall obtain training and a certificate of training by the retort manufacturer. A copy of the certificate of training shall be submitted to the Board upon completion of the training. A copy of the certificate shall also be maintained on site at the crematory, and it shall be subject to inspection by the Board.

Date: _____

I, _____, knowingly and willingly accept the position and responsibility as the
Name of Individual Licensee

manager of _____,
Name of the Establishment

physically located at _____, _____, AR _____.
Establishment Physical Address City ZIP Code

Establishment Board ID #: _____ Establishment License #: _____
(If different then BID#)

Printed Name: _____

Signature: _____

Effective Date of Change(if applicable): _____ Manager Board ID #: _____

Replaces Manager: _____

NOTARY PUBLIC

State of _____

[Notary Stamp or Seal]

County of _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public Signature

My Commission Expires

Return Completed Form To:

Arkansas Department of Commerce
Arkansas Insurance Department |Funeral Services Division
1 Commerce Way, Suite 502 | Little Rock, AR 72202-2087
Phone (501) 682-0574 | Fax (501) 682-0575
E-Mail: AID.EFD@arkansas.gov