



WORKSHEET WAIVER REQUEST FOR MANAGER OF TWO FUNERAL ESTABLISHMENTS

AUTHORITY: 1980 PA 299

**A waiver request for manager of two funeral establishments must be submitted with a
 Change of Manager or New/Relicensure Funeral Establishment Application.**

Prospective Manager Name:	Prospective Manager License Number:
Prospective Manager Residential Address:	
Funeral Establishment Name:	Funeral Establishment License Number:
Funeral Establishment Address:	
Funeral Establishment Name:	Funeral Establishment License Number:
Funeral Establishment Address:	
Are the funeral establishments located in the same county or contiguous counties? Yes No	
The population density of the county in which each of the funeral establishments is located, is less than the population density for this state, based on data from the most recent decennial census. Yes No	
Are the funeral establishments located within 90 miles of each other? Yes No	
Does the Prospective Manager reside within 75 miles from each funeral establishment? Yes No	
Certification: I certify that the statements in this document are true and complete. I understand that any omitted statement, misrepresentation, or fraud may be cause for denial of my application, disciplinary action, or may be punishable by law.	
_____ Signature of Prospective Manager	_____ Date