UTAH DEPARTMENT OF COMMERCE

**Division of Professional Licensing** 

## **RENEWAL/REINSTATEMENT FORM**

LICENSE NUMBER	OCCUPATION / PROFESSION TITLE	RENEWAL FEE	EXPIRATION DATE	REINSTATEMENTS	
Please fill in:	Funeral Service Director	\$88.00	May 31 <sup>st</sup> of even years.	Additional fees are required after expiration. See reverse for details.	
$\downarrow$ NAME AND AI	DDRESS OF RECORD $\downarrow$	↓ ADDRES	SS / PHONE CC	<b>PRRECTION</b> $\downarrow$	
Name:		Is this	s a new address	? □Yes □No	
Address:					
	: State: Zip:			This information will be used for all correspondence from DOPL. You may use a business address or PO Box instead of a home address. If your mailing or	
Phone: () Country: Email:		email ao mail, do	<ul> <li>email address changes, notify DOPL directly. For</li> <li>mail, do not rely on a postal service forwarding order.</li> <li>Submit changes to <u>doplweb@utah.gov</u></li> </ul>		
<b>QUALIFYING QUESTIONNAIRE</b> Answer "YES" or "NO" for each question. Do not leave any question blank. Please note that false, misleading, or fraudulent answers may result in loss of licensure and/or criminal prosecution and are subject to random audit.					
The second					
LI Yes LI No license to practice in a regulated profession?					
Yes No 4. Are you currently under investigation or is any disciplinary, administrative, or criminal action pending against you now by any agency?					
IF YOU ANSWERED "YES"	TO QUESTION 1, 2, 3 OR 4 ABOVE, SEE #1	A ON PAGE TWO FOR	INSTRUCTIONS ON AD	DITIONAL REQUIREMENTS.	
<ul><li>□ I am a foreign nati</li><li>□ None of the above</li></ul>	tes citizen OR a non-citizen of the United ional not physically present in the United e (please explain): or State ID card:	States.			
Driver's License of State ID card: State of issue ID/License Number Expiration date NOTE: If you do not hold a US Driver's license or a US State ID you must present a logible conv of your current and you'd government					
<b>NOTE:</b> If you do not hold a US Driver's license or a US State ID, you must present a legible copy of your current and valid government issued documents(s) showing evidence of lawful presence in the United States.					
AFFIDAVIT / SIGN	ATURE Read the following ca	refully. Sign below	or follow the instr	uctions as indicated.	
<ul> <li>I also certify that I have or reinstatement of my liver or reinstatement of my liver of the renewal or reinstate correct, and is free of fragment will be available for the renewal or reinstate or reinstat</li></ul>	perjury that I am a United States citizen or a completed or will complete all renewal require cense. I understand that I may be subject to the licensee described and identified in this a atement of this license. To the best of my kno ud, misrepresentation, or omission of materia inspection by the public, except with regard to rernment Records Access and Management.	ements, if applicable, ind audit by DOPL of having application for license re owledge, the information al fact. I understand that o the release of informa	cluding those specified g met these requirement newal / reinstatement. n contained in this appli t this application will be tion which is classified	below before the expiration nts. I am qualified in all respects ication is complete and classified as a public record	
Social Security Number	9r				
Signature:	<u></u>	Date:		#1B on page 2 for instructions.)	
<b>RENEWAL REQUIREMENTS</b> Specific to your license: In accordance with Subsection <u>R156-9-304</u> , during the past 2 years, you mut completed 20 hours of qualified continuing professional education related to you received your initial license during the current renewal cycle, you must of pro-rata amount of qualified professional education for the time you were act <b>DO NOT</b> submit documentation of your completed hours unless you are aud requested to do so.		ou must have ed to funeral service. If nust only complete a re actually licensed.	Unlawful Conduct: Your license will automatically expire unless you renew it prior to its expiration date. your license expires you may not practice until a new license is issued. Subsection <u>58-1-501(1)(a)</u> and Section <u>58-1-502</u> , U.C.A., make it unlawful and punishable as a criminal offense to practice your occupation or profession beyond the <u>expiration of your license</u> .		



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## ADDITIONAL REQUIRED DOCUMENTATION

- A. If you answered "yes" to question 1, 2, 3, and/or 4 on the first page of this renewal, you must submit complete documentation including a personal narrative and any police arrest report, court docket, probation/parole officer report, diversion agreement, and/or plea in abeyance agreement for each and every arrest, charge, and/or conviction.
- B. If you cannot sign the Affidavit on the first page of this renewal, you must submit a complete written explanation of why you cannot sign. If applicable, this explanation must include the reasons you have not or will not complete the continuing education requirements before the expiration or reinstatement of your license. DOPL personnel will reach a renewal decision on a case-by-case basis after a thorough review of your explanation. Additionally, you may be requested to provide additional information if the documentation submitted is insufficient.

## CHECKLIST FOR TIMELY RENEWAL / REINSTATEMENT BY MAIL

- Answer all of the certification questions on pages 1 & 2, and provide additional documentation, if applicable (#*A* & *B* above).
- □ Sign the Affidavit on page 1 or submit a complete explanation of why you cannot sign (*#B above*).
- **D** Pay the correct fee. If reinstating a license after the expiration date, you must pay an additional reinstatement fee.
- Sign your check or money order. **DO NOT SEND CASH.** (*Make checks or money orders payable to "DOPL."*)
- Enclose documentation of your legal name change, if applicable.
- □ Mail all fees, forms, and documentation to DOPL at PO Box 146741, Salt Lake City, UT 84114-6741.

**LEGAL NAME CHANGE**: If your legal name has changed, you must verify the change by submitting a copy of an updated social security card, passport, driver license, marriage certificate, divorce decree, and/or court order. If your name change represents a new business entity, you must submit a new application for licensure before beginning practice as the new entity.

**ADDRESS OR EMAIL CHANGE:** You must keep your address current with DOPL, including your email address. You cannot rely on postal service forwarding. Submit changes online at <u>www.dopl.utah.gov</u>. (*If licensed as an entity, including sole proprietor, you must also notify the Utah Division of Corporations of any change: (801) 530-4849.*)

**<u>TIMELY RENEWAL</u>**: You are responsible to comply with all renewal / reinstatement requirements in statute and rule, and your license will automatically expire unless you renew it prior to its expiration date. Therefore, you are encouraged to save time by renewing online at <u>www.dopl.utah.gov</u> where you can immediately print out a confirmation of renewal.

<u>APPLICATION APPROVAL</u>: Your application will be approved unless you do not meet the renewal / reinstatement requirements or have engaged in serious misconduct. Licenses with specific requirements listed on page 1 of this form may be subject to audit by DOPL. Those selected for audit will be notified. DOPL reserves the right to initiate action at any time against a licensee who did not meet the renewal / reinstatement requirements at the time the license was issued.

**NON-REFUNDABLE FEES**: Renewal fees paid with this application are for processing your request for renewal of licensure and are non-refundable. Simply paying the fees does not mean that your license will be automatically renewed.

**REINSTATEMENT FEES:** If you fail to timely renew your license, you will be subject to the following conditions:

- If you are reinstating your license within 30 days after the expiration date of your license, you must submit the renewal fee **PLUS** an additional \$20.00 for **EACH** license being reinstated.
- If you are reinstating your license after 30 days and within two years of the expiration date of your license, you must submit the renewal fee **PLUS** an additional \$50.00 for **EACH** license being reinstated. (*Reinstating Lien Recovery Fund members must also submit another \$50.00 in addition to any special LRF assessments.)*
- Fees are subject to change each July 1. If listed, the fees on the application are current at the time printed. Please verify the current fee at www.dopl.utah.gov if applying for reinstatement more than one year following expiration of your license.

NOTICE: If you fail to reinstate your license within two years of the expiration date of your license, you must submit a new application, meet current requirements for licensure, and pay the fees specified in subsection R156-1-308g (3). Contact DOPL for assistance if reinstating after two years of expiration.

<u>ON-LINE RENEWAL INFORMATION</u>: If you do not already have a **Utah ID**, you will need to create an account. Gather your license number, social security number, debit or credit card, and your Registration Code. Go to <u>utahdoc.mylicenseone.com</u> and follow the directions under Existing License Holders to link your license to your account. Then, follow the online instructions for license renewal. A renewed license, certificate, or registration will be emailed to you the next business day after your online renewal is completed.

TAX ID NUMBER: The Tax ID Number for the Division of Professional Licensing is 87-6000545.