

Attestation for Holding and Embalming Rooms

All Funeral Establishment Operators Class 1, and only Transfer Service Operators Class 1 & 2 *with an on-site holding room* must complete and submit this Attestation annually to the BAO at time of licence renewal.

I, _____ (Full Name and Licence Number of Manager), am the person in charge of day-to-day operations of record at

_____ (Site Name, Address and Licence Number)
 and I attest to the following conditions of the

Embalming Room Holding Room located at the above referenced site.

HWIN waste generator number: _____

Requirements for Holding and Embalming rooms: (Per sections 47, 48 and 50 of Ontario Regulation 30/11 with exceptions as noted)		
	Yes	No
All surfaces (floor, walls, cabinets, counters, tables, etc.) are capable of being easily cleaned, sanitized and disinfected (i.e., free from chips, scratches or exposed porous materials).		
All equipment is capable of being easily cleaned, sanitized and disinfected.		
The room is equipped with materials and equipment necessary to clean, sanitize and disinfect the room and the equipment used in the room.		
The room is in a clean, sanitary and disinfected condition.		
The room is equipped with materials and equipment necessary to clean, sanitize and disinfect dead human bodies.		
There is a supply of running water with a device to prevent back-flow of water.		
There is mechanical ventilation directly to the outside of the building.		
There is a sufficient supply of personal protective equipment and clothing for each person working in the room.		
First aid kit (Ontario Reg. 1101 under the <i>Workplace Safety and Insurance Act, 1997</i>)		
Eye wash station (Required under <i>OHS</i> A if certain chemicals are used – refer to First Aid information on MSDS sheets of chemicals used. As an example, eyes exposed to a formaldehyde-type fluid require at least 15 minutes of continuous water flow.)		
Additional requirement for Embalming room only: (Pursuant to section 48 of Ontario Regulation 30/11)		
The room contains facilities to dispose of bodily fluids and waste appropriately.		

Warning: It is an offence to provide false information on this document.

 Authorized Signature

 Date (mm/dd/yyyy)