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Request For One Person to Manage More Than One Business

Funeral, Burial and Cremation Services Act, 2002 (FBCSA)

	1 made under the <i>Funera</i> f more than one business							
Person requesting and			(heck One:		
authorizing change:	First name Last name				Operator Desition:			
	First nume	LUSI			<u> </u>	<u> </u>		
Date (mm/dd/yyyy):			Signature:					
Name of Licensee to Manage:					Licer	ice Number:		
Proposed Effective Date	First name Last name (mm/dd/yyyy) :				Licence Class:			
Location #1								
Establishment Name:					Licence Number:			
Current Manager of					Licence Number:			
Location #1	First name Last name							
Location #2				T				
Establishment Name:	T				Licence Number:			
Current Manager of Location #2:	First name Last name				Licence Number:			
Location #3	First name	Last	t name					
Establishment Name:					Licence Number:			
Current Manager of					Licence Number:			
Location #3:	First name Last name							
Details of Business	Location #1		Location #2		Location #3			
# of Calls*								
Distance	From #1 to #2	km	From #2 to #3	kr	n	From #3 to #1	km	
*Number of Calls reported on the last renewal form for Nov. 1 to Oct. 31 of the previous year.								
Full Time Employees	Location #1		Location #2		Location #3			
# FD-Class 1								
# FD-Class 2								
# FPP								
# TSSR								
# FD Interns								
# FPP Interns								
# TSSR Interns								
# Unlicensed								
Total Personnel				T				
Signature of Licensee to Manage:				Date (mm/dd/yyyy):				
	llected on this form is used for the purpose appropriate internship program and to help							