



# TEXAS FUNERAL SERVICE COMMISSION

## APPOINTMENT OF FUNERAL DIRECTOR IN CHARGE

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Establishment Name \_\_\_\_\_ License Number \_\_\_\_\_

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Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

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Funeral Director in Charge \_\_\_\_\_ License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Date Appointed \_\_\_\_\_

Are you currently serving as FDIC at any other location?

Yes \_\_\_\_\_ No \_\_\_\_\_

Name of other establishment \_\_\_\_\_

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Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

As the Funeral Director in Charge, I am responsible to the Commission for the legal and ethical operation of this establishment and understand that I may be served with administrative process when violations are alleged to have been committed by the funeral establishment. I will notify the Commission in writing immediately if and when the relationship is terminated. I certify to the correctness contained in this application.

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Funeral Director in Charge \_\_\_\_\_

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Establishment Owner \_\_\_\_\_

Subscribed and sworn to me, the undersigned Notary Public of the State of Texas, on this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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Notary Public \_\_\_\_\_ My Commission Expires \_\_\_\_\_  
(seal)

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**Address:**  
P. O. Box 12217  
Capitol Station  
Austin, Texas 78711

**Toll Free:** (888) 667-4881  
**Tel:** (512) 936-2474  
**Fax:** (512) 479-5064  
**website:** [www.tfsc.state.tx.us](http://www.tfsc.state.tx.us)

**Physical Address:**  
333 Guadalupe Street  
Suite 2-110  
Austin, Texas 78701