



## TEXAS FUNERAL SERVICE COMMISSION

### REMOVAL OF FUNERAL DIRECTOR IN CHARGE

---

Establishment Name License Number

---

Street Address City Zip

---

Funeral Director in Charge License Number Expiration Date

---

Date Removed \_\_\_\_\_

Is this individual currently serving as FDIC at any other location?

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

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

---

Street Address City Zip

As the Owner/Manager of the Funeral Establishment do hereby authorize the removal of the current Funeral Director in Charge. I will notify the Commission in writing within fifteen (15) days of the appointment of the new Funeral Director in Charge. I certify to the correctness contained in this application.

---

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

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

---

Notary Public \_\_\_\_\_

(seal)

My Commission Expires \_\_\_\_\_

---

**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