**Professional Licensing Agency** 402 West Washington Street Room W072 Indianapolis, IN 46204



Eric J. Holcomb Governor of Indiana Deborah J. Frye PLA Executive Director

## Funeral Home and Funeral Branch Renewal Document

You may renew online at <u>mylicense.in.gov</u> using the <u>Register a Business</u> option to create your login credentials. Registration codes were included on the renewal emails and documents mailed to each funeral home and branch You may also complete and mail this document with the renewal fee of \$50.00 to the address above. Make check or money order payable to 'Indiana Professional Licensing Agency'. If this document is postmarked after your license expiration date you must include a \$50 late fee.

| LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address  |               |                         |             |  |
|--|---------------|-------------------------|-------------|--|
| Licensee Name  | License Numbe |                         | Renewal Fee |  |
|  |               |                         |             |  |
| Street Address:  | City          | State                   | Zip         |  |
| Phone Number   | Email Address |                         |             |  |
| RENEWAL INFORMATION  |               |                         |             |  |
| 1. Sign and date application in ink.   |               |                         |             |  |
| ADDITIONAL INFORMATION   |               |                         |             |  |
| After your license has been renewed you will need to print a free license card or order one from our website at <a href="http://www.in.gov/pla/license.htm">www.in.gov/pla/license.htm</a> to comply with the posting requirement. |               |                         |             |  |
| LICENSEE AFFIRMATION   |               |                         |             |  |
| I hereby swear or affirm under the penalties of perjury that the information provided here is true and correct to the best of my knowledge.  |               |                         |             |  |
| Signature of Licensee  |               | Date (month, day, year) |             |  |

Visit www.pla.in.gov for additional information regarding your license.

If you have any questions for the State Board of Funeral and Cemetery Service please email <u>pla12@pla.in.gov</u> or call 317-234-3031.

| FOR OFFICE USE ONLY |              |       |  |
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| Renewal Fee:        | Receipt No.: | Date: |  |
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