

**Texas Department of Banking**  
Cemetery Brokers  
Initial Registration Form

**Before completing this registration, please read Section 711.0381 and Subchapter C-1, Chapter 711, Health and Safety Code, and Title 7, Texas Administrative Code, Chapter 24.**

**Responses to all questions must be provided. Indicate if the answer is “None” or “Not Applicable.”**

**Section I. General Information**

- 1. Registrant’s full legal name:  
\_\_\_\_\_
  
- 2. Indicate the form of the registrant’s legal organization, e.g. sole-proprietorship, corporation, limited liability company, limited partnership, joint venture, or other.  
\_\_\_\_\_
  
- 3. State of domicile or formation of registrant: \_\_\_\_\_
  
- 4. Registrant’s DBA or assumed name(s) to be used in Texas, if applicable:  
\_\_\_\_\_

**Provide copies of the DBA or assumed name(s) filings, as applicable, filed with the Texas Secretary of State and with the clerk of court in the counties where the registrant proposes to do business, if a name other than the legal name of the registrant is to be used in Texas.**

- 5. Registrant’s principal business location (street address, city, state, and zip code):  
\_\_\_\_\_  
\_\_\_\_\_
  
- 6. Registrant’s mailing address, if different from principal business location:  
\_\_\_\_\_
  
- 7. Registrant’s business telephone number: \_\_\_\_\_
  
- 8. Registrant’s website address: \_\_\_\_\_
  
- 9. The person responsible for this registration:

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Title  
\_\_\_\_\_  
Business Telephone Number  
\_\_\_\_\_  
Business Fax Number  
\_\_\_\_\_  
E-mail address

10. The person responsible for complaints:

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Name

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Title

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Business Telephone Number

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E-mail address

11. If the registrant is a corporation or limited liability company, provide a certificate of account status from the Texas Comptroller of Public Accounts.

12. If the registrant is a corporation, limited liability company, or partnership, provide proof of registration with the Texas Secretary of State, regardless of whether the registrant is a foreign or domestic corporation.

13. Provide the names and positions of the officers of the registrant.

<b>Name</b>	<b>Title</b>	<b>Date Appointed to Office</b>

14. Provide a list of the individuals who will own or have the power to directly or indirectly vote 25% or more of the outstanding stock of the registrant (includes an individual whose ownership is through one or more legal entities). Include the name, shares owned or controlled, number and percent of outstanding shares.

15. Explain how the registrant will provide the consumers with written notice regarding how to file a complaint. Provide a copy of the consumer complaint notice.

**Section II. Certification**

The Registrant attests that it (1) has clients in Texas and (2) maintains a record of each sale or resale of a cemetery plot for its clients, who are not officers, agents, or employees of cemetery organizations.

I acknowledge that under Texas Health and Safety Code §711.083, the Department of Banking has authority to examine the records that I am required to maintain by §711.083(g).

I hereby certify that I am authorized to file this registration on behalf of the registrant, and that all information submitted in connection with this registration is true and correct, to the best of my knowledge and belief.

A person commits a felony offense if the person intentionally makes an untrue statement of material fact in this registration form.

\_\_\_\_\_ by \_\_\_\_\_  
(Registrant) (Signature)

\_\_\_\_\_  
(Printed or Typed Name)

\_\_\_\_\_  
(Title)

STATE OF \_\_\_\_\_  
COUNTY OR PARISH OF \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a Notary Public in and for said County, of said State, personally appeared:

\_\_\_\_\_ known to me to be the person named in, and who executed the foregoing form and made oath that the statements and representations set forth therein are true to the best of his/her knowledge and belief.

\_\_\_\_\_  
(Notary Public)

### **Section III. Submission of Registration and Required Fee**

The annual administration fee is \$100. Submit this registration and the fee by check payable to the **Texas Department of Banking** to the following address:

**Texas Department of Banking  
Corporate Activities Division  
2601 North Lamar Blvd., Suite 300  
Austin, TX 78705-4294**

Direct any questions regarding this registration to [corpapp@dob.texas.gov](mailto:corpapp@dob.texas.gov).