



Cemetery Board
CEMETERY ADDITION FORM
Fee \$580.00 per cemetery

1. Cemetery Company Name _____
Enter the company name as it appears on the license.

2. VA Cemetery Company License No. _____ Expiration Date _____

3. New Cemetery Name _____

4. New Cemetery's Street Address _____

_____ City _____ State _____ Zip Code _____

5. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this form. I certify that I understand, and have complied with, all the laws of Virginia related to cemetery company licensure under the provisions of Title 54.1, Chapter 23.1 of the *Code of Virginia* and the *Virginia Cemetery Board Regulations*.

Signature _____ Date _____
Officer, Director, or Compliance Agent

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			3050		4901	