

# The Cemeteries Act

## Application for Owner or Agent of an owner licence



### A. Type of Licence

Licence as an owner or as an agent of an owner to sell, lease or rent lots, plots, compartments or other space in a cemetery, columbarium or mausoleum.

(Select **one** of the following options) :

<b>Owner</b>	<b>Fee</b>
or	27.50
<b>Agent for an owner</b>	27.50
<b>Amount owing</b>	<b>\$ 27.50</b>

### B. Applicant Information

Name :	Age :	Email address :
Personal Address :		
City :	Province :	Postal Code :
Home phone number :	Cell number :	
Employer :		
Employer address :		
City :	Province :	Postal Code :
Work number :	Cell number :	
Fax number :	Email address :	

### C. Applicant's Declaration

I acknowledge that the information provided in this application is true and correct.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

## D. Employer's Confirmation and Approval

This is to confirm that the Applicant will be engaged as an Agent, as stated in the application annexed hereto, upon issuance of a licence. The Applicant has been made aware that the licence, if issued, authorizes him/her to sell only for the named employer.

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Signing authority for employer

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Date

### NOTE :

- The Consumer Protection Office must be notified of all changes to any of the information provided in this application.
- Names of individuals licensed as an owner or as an agent of an owner to sell, lease or rent lots, plots, compartments or other space in a cemetery, columbarium or mausoleum may be published on the Funeral Board of Manitoba website.

## E. Instructions

- Please complete the application in full and return to the Consumer Protection Office along with payment of the prescribed fee(s).
- Payment can be made via cheque payable to the Minister of Finance to Room 302-258 Portage Avenue, Winnipeg MB R3C 0B6 or online with a Visa or MasterCard by visiting [www.cpopayment.com](http://www.cpopayment.com). If paying online, please mail the payment confirmation number along with the original signed application form for processing.

**\*\* ONLY ORIGINAL APPLICATION FORMS WILL BE ACCEPTED \*\***