

**Commonwealth of Virginia - Department of Health Professions  
Funeral Inspection Report**

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804-367-4400

		Date	Time	Inspection Hours
Name of Funeral Establishment or Branch	<input type="checkbox"/> Establishment: License No 0501	<input type="checkbox"/> PENDING	Exp:	
	<input type="checkbox"/> Branch: License No 0511	<input type="checkbox"/> PENDING	Exp:	
Street Address	City	State VIRGINIA	ZIP	Telephone
Manager	License No: 0502	Expiration Date	Fax	
Type of Inspection <input type="checkbox"/> New/COL <input type="checkbox"/> Routine <input type="checkbox"/> Reinspection <input type="checkbox"/> Change of Owner <input type="checkbox"/> Other (Describe)				Email
Prep Room On-site: <input type="checkbox"/> Yes <input type="checkbox"/> No		Original Preneed Contracts On-site: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Deficiencies Identified

C = Compliant    NC = Not Compliant    R = Repeat Citation    N/A = Not Applicable or Not Reviewed

ESTABLISHMENT LICENSE & MANAGER OF RECORD				
C	NC	R	NA	LAW/REGULATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2800
FOR NEW OR CHANGE OF LOCATION INSPECTIONS ONLY: A Certificate of Occupancy (CO) issued by the local building official. (The Board needs a copy of the CO)				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-50
Each licensee shall post an original or photocopy of his license in a place conspicuous to consumers of funeral services in each establishment or branch where he is employed.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-50
The establishment license shall be posted in a place conspicuous to consumers of funeral services.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-170
Except as provided in §54.1-2810 of the Code of Virginia, every funeral service establishment and every branch or chapel of such establishment, regardless of how owned, shall have a separate manager of record who has responsibility for the establishment as prescribed in 18VAC65-20-171.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-171
Every funeral establishment shall have a manager of record who is employed full time by and in charge of the establishment. The manager shall be fully accountable for the operation of the establishment. The MOR's duties include but are not limited to:				
<ul style="list-style-type: none"> <li>• Maintenance of facility</li> <li>• Retention of reports and documents as prescribed by the board in 18VAC65-20-700</li> <li>• Reporting to the board of any changes in information as required by 18VAC65-20-60</li> </ul>				
STANDARDS FOR EMBALMING AND REFRIGERATION				
C	NC	R	NA	LAW/REGULATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-510
<b>EMBALMING REPORT, DOCUMENTATION OF EMBALMING, REFRIGERATION REQUIREMENTS</b> Every funeral establishment shall record and maintain a separate, identifiable report for each embalming procedure conducted, which shall at a minimum include the following information: 1. The name of the deceased and the date of death; 2. The date and location of the embalming; 3. The name and signature of the embalmer and the Virginia license number of the embalmer; and 4. If the embalming was performed by a funeral service intern, the name and signature of the supervisor.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2811.1
A dead human body shall be maintained in refrigeration and shall not be embalmed in the absence of express permission by a next of kin of the deceased or a court order.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-510
Express permission by next of kin for embalming means written authorization to embalm as a specific and separate statement on a document or contract provided by the funeral establishment. Express permission may include direct, verbal authorization to embalm, provided it is followed as soon as possible by a written document or statement signed by the next of kin confirming the verbal authorization to embalm and including the time, date, and name of the person who gave verbal authorization.				

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C	NC	R	NA	LAW / REGULATION	PREPARATION ROOM REQUIREMENTS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-540	Every funeral service establishment at which embalming of dead human bodies is performed shall have at least one room used exclusively for embalming or preparation of the body.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-540	All functions connected with embalming shall be performed within the preparation room.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-540	The following are required of the preparation room or rooms: 1. The walls shall extend floor to ceiling; 2. The floor and wall surfaces shall be of a material or covered by a material impervious to water; and 3. The material shall extend from wall to wall with all joints tight and sanitary.
C	NC	R	NA	LAW / REGULATION	CONDITIONS OF PREPARATION ROOM
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-570	The preparation room or rooms shall be kept in a clean and sanitary condition at all times, subject to inspection.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-570	Inventories of embalming and preparation materials shall be stored in a container and in a manner that makes them impervious to water and protects them from contamination.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-570	Any items or supplies not directly used in an embalming procedure shall not be stored in the preparation room.
C	NC	R	NA	LAW / REGULATION	PREPARATION ROOM EQUIPMENT
					The preparation room or rooms shall be equipped with:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	A ventilation system which operates and is appropriate to the size and function of the room
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Running hot and cold water
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Flush or slop sink connected with public sewer or with septic tank where no public sewer is available
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Metal, fiberglass or porcelain morgue table
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Covered waste container
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Instruments and apparatus for the embalming process
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	A means or method for the sterilization of reusable instruments by chemical bath or soak; autoclave (steam); or ultraviolet light
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Disinfectants and antiseptic solutions
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Clean gowns or aprons, preferably impervious to water
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	Rubber gloves for each embalmer or intern using the room
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	An electric aspirator or hydroaspirator equipped with a vacuum breaker
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	An eye wash station that is readily accessible
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-580	A standard first aid kit which is immediately accessible, either in the preparation room or outside the door to the preparation room
C	NC	R	NA	LAW / REGULATION	DISPOSAL OF WASTE MATERIALS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-590	Disposal of all waste materials shall be in conformity with local, state, and federal law and regulations to avoid contagion and the possible spread of disease. Upon inspection, the establishment shall provide evidence of compliance, such as a copy of a contract with a medical waste disposal company.

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C	NC	R	NA	LAW/REGULATION	REFRIGERATION, HANDLING, STORAGE OF HUMAN REMAINS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2811.1	Upon taking custody of a dead human body, a funeral service establishment shall maintain such body in a manner that provides complete coverage of the body and that is resistant to leakage or spillage, except during embalming or preparation of an unembalmed body for final disposition; restoration and dressing of a body in preparation for final disposition; and viewing during any visitation and funeral service.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2811.1	If a dead human body is to be stored for more than 48 hours prior to disposition, a funeral services establishment having custody of such body shall ensure that the dead human body is maintained in refrigeration at no more than approximately 40 degrees Fahrenheit or embalmed. A dead human body shall be maintained in refrigeration and shall not be embalmed in the absence of express permission by a next of kin of the deceased or a court order. <b>NOTE: Guidance Document 65-11 Rev April 17, 2018: The Board agreed to accept a 10% variance of the required temperature.</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-581	If a dead human body is to be in the possession of a funeral establishment or crematory for more than 48 hours from the time the funeral establishment or crematory takes physical possession of the body until embalming, cremation, or burial, the body shall be placed and maintained in refrigeration in a mechanical refrigeration unit suitable for storing human remains. The mechanical refrigeration unit may be located in the funeral establishment or crematory or the funeral home or crematory can enter into an agreement or contract with another funeral establishment, crematory, or other licensed entity for refrigeration. (Evidence of compliance with the requirement for refrigeration shall be maintained as a log entry or other documentation indicating times of placement in and removal of a body from refrigeration.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2811.1	If a dead human body is to be stored for more than 10 days prior to disposition at a location other than a funeral service establishment, the funeral service establishment shall disclose to the contract buyer the location where the body is to be stored and the method of storage.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2811.1	Funeral services establishments, crematories, or transportation services shall not transport animal remains together with dead human bodies. Further, animal remains shall not be refrigerated in a unit where dead human bodies are being stored.
C	NC	R	NA	LAW/REGULATION	STANDARDS FOR REGISTERED CREMATORIES OR FUNERAL ESTABLISHMENTS RELATED TO CREMATION
					Authorization to cremate
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (A)	A crematory shall require a cremation authorization form executed in person or electronically in a manner that provides a copy of an original signature of the next-of-kin or his representative, who may be any person designated to make arrangements for the decedent's burial or the disposition of his remains pursuant to §54.1-2825, an agent named in an advance directive pursuant to §54.1-2984, or a sheriff, upon court order, if no next-of-kin, designated person or agent is available.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (A)	The cremation authorization form shall include an attestation of visual identification of the deceased from a viewing of the remains or a photograph signed by the person making the identification.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (A)	The identification attestation shall either be given on the cremation authorization form or on an identification form attached to the cremation authorization form.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (A)	In the event visual identification is not feasible, a crematory may use other positive identification of the deceased as a prerequisite for cremation, pursuant to §54.1-2818.1.
C	NC	R	NA	LAW/REGULATION	Handling of Human Remains
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (C)	Human remains shall be transported to a crematory in a cremation container and shall not be removed from the container unless the crematory has been provided with written instructions to the contrary by the person who signed the authorization form.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (C)	A cremation container shall substantially meet all the following standards: <ul style="list-style-type: none"> <li>• Be composed of readily combustible materials suitable for cremation</li> <li>• Be able to be closed in order to provide complete covering for the human remains</li> <li>• Be resistant to leakage or spillage</li> <li>• Be rigid enough for handling with ease</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-436 (C)	The identification of the decedent shall be physically attached to the remains and appropriate identification placed on the exterior of the cremation container.
RETENTION OF DOCUMENTS					
C	NC	R	NA	LAW/REGULATION	The following retention schedule shall apply to retention of embalming reports, price lists, and itemized statements:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-700	Price lists shall be retained for three years after the date on which they are no longer effective.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-700	Itemized statements shall be retained for three years from the date on which the arrangements were made.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-700	Embalming reports shall be retained at the location of the embalming for three years after the date of the embalming.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-700	Documents shall be maintained on the premises of the funeral establishment and made available for inspection.

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DISCLOSURES					
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	18VAC65-20-630 Funeral providers shall make all required disclosures and provide accurate information from price lists pursuant to the rules of the Federal Trade Commission. Price lists shall comply with requirements of the FTC and shall contain the information included in Appendices I, II, and III of this chapter.
GENERAL PRICE LIST					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Caption identifying the list as the General Price List.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Name, address & telephone number of funeral establishment.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Effective date of the pricelist.
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	<b>SECTION I – GENERAL INFORMATION</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	<b>Required Disclosure:</b> <i>"The goods and services shown below are those we can provide to our customers. You may choose only the items you desire. However, any funeral arrangements you select will include a charge for our basic services and overhead. If legal or other requirements mean you must buy any items you did not specifically ask for, we will explain the reason in writing on the statement we provide describing the funeral goods and services you selected."</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2806 (24)	"Certain funeral services may be provided off-premises by other funeral service providers."
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	<b>SECTION II - PROFESSIONAL SERVICES OF FUNERAL DIRECTOR AND STAFF</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Basic Services of Funeral Director and Staff \$ _____ <i>"This fee for our basic services and overhead will be added to the total cost of the funeral arrangements you select. (This fee is already included in our charges for direct cremations, immediate burials, and forwarding or receiving remains.)" OR Please note that a fee of \$_____ for the use of our basic services and overhead is included in the price of our caskets. This same fee shall be added to the total cost of your funeral arrangements if you provide the casket."</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Our services include: (*Note: List what charge for basic services includes)
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	<b>SECTION III – FUNERAL HOME FACILITIES</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-630	Price list includes charge and description for: 1. Facilities and staff for visitation and viewing 2. Facilities and staff for funeral ceremony 3. Facilities and staff for memorial service 4. Equipment and staff for graveside service
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	(*Note: If you have additional charges such as facilities and staff for home/church viewing, or a charge for additional staff per person or through calculation of manhours, etc., add here as extra items. If you have a charge for interment, add here. Describe what charges include.)
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	<b>SECTION IV - EMBALMING</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	"Embalming is not required by law. Embalming may be necessary, however, if you select certain funeral arrangements such as a funeral with viewing. If you do not want embalming, you usually have the right to choose an arrangement that does not require you to pay for it, such as direct cremation or immediate burial.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Embalming charge for normal and autopsy remains. (*Note: If the cost for embalming is the same for normal and autopsied remains, only one price may be listed)
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	<b>SECTION V - OTHER PREPARATION OF THE DECEASED</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Description and price of other preparation if provided. (*Note: List below each preparation service that you offer and the price. If you do not charge for other preparation, remove this section.)
<input type="checkbox"/> C	<input type="checkbox"/> NC	<input type="checkbox"/> R	<input type="checkbox"/> NA	LAW/REGULATION	<b>SECTION VI – IMMEDIATE BURIAL</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Price range for immediate burial and what is included in the charge. (*Note: A price range must be given for this service. Your prices should range from your immediate burial package with container provided by purchaser to your immediate burial package plus your most expensive casket.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Our charges include: (*Note: List under each category what the charge includes) <ul style="list-style-type: none"> <li>• Immediate burial with container provided by purchaser</li> <li>• Immediate burial with lowest priced alternative container                              (*Note: If an alternative container is not offered, this line item may be omitted; if an alternative container is offered, include a brief description.)</li> <li>• Immediate burial with highest priced casket</li> </ul>

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C	NC	R	NA	LAW / REGULATION	SECTION VII – DIRECT CREMATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Price range for direct cremation and what is included in the charge. Note: A price range must be given for a direct cremation. Your prices should range from direct cremation with a container provided by the purchaser to the price for direct cremation plus the highest priced casket acceptable for cremation.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	<i>"State and local laws do not require a casket for direct cremation. If you want to arrange a direct cremation, you can use an alternative container. Alternative containers encase the body and can be made of materials like fiberboard or composition materials (with or without an outside covering). The containers we provide are [specify containers]."</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Describe the services included for each category listed below. <ul style="list-style-type: none"> <li>• Direct cremation with container provider by the purchaser</li> <li>• Direct cremation with each alternative container specified in the disclosure                          (*A price and description for alternative container should be provided)</li> <li>• Direct cremation with highest priced casket acceptable for cremation</li> </ul>
C	NC	R	NA	LAW / REGULATION	SECTION VIII - TRANSFER OF REMAINS TO FUNERAL ESTABLISHMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Charge and description for transfer of remains to a funeral establishment. (*Note: This is added only when it is <u>not</u> included under professional services. You must explain what this charge includes if listed separately.)
C	NC	R	NA	LAW / REGULATION	SECTION IX - FORWARDING REMAINS TO ANOTHER FUNERAL ESTABLISHMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Charge and description for forwarding remains to another funeral establishment.
C	NC	R	NA	LAW / REGULATION	SECTION X - RECEIVING REMAINS FROM ANOTHER FUNERAL ESTABLISHMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Charge and description for receiving remains from another funeral establishment.
C	NC	R	NA	LAW / REGULATION	SECTION XI - AUTOMOTIVE EQUIPMENT AND SERVICES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-20-630  APPENDIX I	Charge and description for automotive equipment and services (*Note: Specify a range of miles for local service. If a fee is charged beyond local miles, please specify the fee per mile. The cost of any vehicle that you must rent should be included on the itemized statement as a cash advance item.) <ul style="list-style-type: none"> <li>• Use of hearse</li> <li>• Use of limousine</li> <li>• Other automotive equipment and services</li> </ul> (*Note: You should provide a description and price for each automotive equipment and service listed.)
C	NC	R	NA	LAW / REGULATION	SECTION XII – FUNERAL MERCHANDISE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Caskets: Price range and <i>"A complete price list will be provided at the funeral home."</i> (*Note: Statement in italics is not required if prices of individual caskets are listed on the General Price List and not on a separate Casket Price List.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Outer Burial Container: Price range and <i>"A complete price list will be provided at the funeral home."</i> (*Note: Statement in italics is not required if prices of individual outer burial containers are listed on the General Price List and not on a separate Outer Burial Container Price List.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX I	Other Funeral Merchandise: (*Note: List all other merchandise that you offer including acknowledgment cards, register book, memorial folders, etc. and include the price.)
C	NC	R	NA	LAW / REGULATION	<b>CASKET PRICE LIST OUTER BURIAL CONTAINER PRICE LIST</b> (If not included in the general Price List)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX II	Effective date of Casket Price List
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX II	Effective date of Outer Burial Container Price List
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX II	Name, address & telephone number of funeral establishment.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX II	Caption identifying price list as casket or Outer Burial Container Price list.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX II	Price Lists include manufacturer, price of casket, and sufficient information to describe the casket, alternative container, or outer burial container.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX II	Outer Burial Price Container List includes the statement: <i>State or local law does not require you to buy a container to surround the casket in the grave. However, many cemeteries require that you have such a container so that the grave will not sink in. Either a grave liner or a burial vault will satisfy these requirements.</i> <b>NOTE:</b> If the funeral home services a locality that has an ordinance requiring an outer burial container in its cemeteries, this disclosure should start with the phrase, <i>"In most areas of the country,"</i> .

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C	NC	R	NA	LAW / REGULATION	ITEMIZED STATEMENT OF FUNERAL GOODS AND SERVICES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	Itemized Statement is provided to the party contracting for funeral arrangements.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	Name, address & telephone number of funeral establishment.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	Itemized Statement is signed by Licensed Funeral Director or Funeral Service Provider and party contracting for funeral arrangements.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	<i>"If you selected a funeral that may require embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming that you did not approve if you selected arrangements such as direct cremation or immediate burial. If we charged for embalming, we will explain why below."</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	<i>"We charge you for our services in obtaining:" (List each cash advance item. If you do not charge for your services and do not receive a commission or rebate from the third party, you do not have to use this disclosure.)</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	<i>"Charges are only for those items that you selected or that are required. If we are required by law or by a cemetery or crematory to use any items, we will explain the reason in writing below:"</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPENDIX III	<i>"The only warranty on the casket or outer burial container, or both, sold in connection with this service is the express written warranty if any, granted by the manufacturer. This Funeral Home makes no warranty, express or implied, with respect to the casket or outer burial container."</i>
C	NC	R	NA	LAW / REGULATION	PRENEED RECORDS - GENERAL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-60	Preneed contracts and reporting documents shall be retained on the premises of the establishment for one year after the death of the contract beneficiary.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-60	All preneed records shall be available for inspection by the Department of Health Professions.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-70	A contract provider shall keep a chronological or alphabetical listing of all preneed contracts. The listing shall include the following: 1. Name of contract buyer; 2. Name of contract beneficiary; 3. Date of contract; 4. How contract was funded; 5. Whether up to 10% of funds are retained by the contract provider for contracts funded through trust; and 6. Whether funeral goods and supplies are stored for the contract buyer.
C	NC	R	NA	LAW / REGULATION	PRENEED CONTRACTS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-80	In addition to requirements of §54.1-2820 of the Code of Virginia, the contract shall contain the following: 1. The date of the contract; 2. Whether or not the price of the supplies and services purchased is guaranteed; 3. The appointee agreement when applicable; and 4. Signatures of the contract seller and the contract buyer.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2820	It shall be unlawful for any person residing or doing business within this Commonwealth, to make, either directly or indirectly by any means, a preneed funeral contract unless the contract: 1. Is made on forms prescribed by the Board and is written in clear, understandable language and printed in easy-to-read type, size and style; 2. Identifies the seller, seller's license number and contract buyer and the person for whom the contract is purchased if other than the contract buyer; 3. Contains a complete description of the supplies or services purchased; 4. Clearly discloses whether the price of the supplies and services purchased is guaranteed; 5. States if funds are required to be trusted pursuant to § 54.1-2822, the amount to be trusted, the name of the trustee, the disposition of the interest, the fees, expenses and taxes which may be deducted from the interest and a statement of the buyer's responsibility for taxes owed on the interest; 6. Contains the name, address and telephone number of the Board and lists the Board as the regulatory agency which handles consumer complaints; 7. Provides that any person who makes payment under the contract may terminate the agreement at any time prior to the furnishing of the services or supplies contracted for except as provided pursuant to subsection B of §54.1-2820; if the purchaser terminates the contract within 30 days of execution, the purchaser shall be refunded all consideration paid or delivered, together with any interest or income accrued thereon; if the purchaser terminates the contract after 30 days, the purchaser shall be refunded any amounts required to be deposited under 54.1-2822, together with any interest or income accrued thereon; 8. Provides that if the particular supplies and services specified in the contract are unavailable at the time of delivery, the seller shall be required to furnish supplies and services similar in style and at least equal in quality of material and workmanship and the representative of the deceased shall have the right to choose the supplies or services to be substituted; 9. Discloses any penalties or restrictions, including but not limited to geographic restrictions or the inability of the provider to perform, on the delivery of merchandise, services or prearrangement guarantee.

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C	NC	R	NA	LAW / REGULATION	PRENEED CONTRACTS (cont.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-200	<b>Supplies &amp; Services:</b> If the contract seller will not be responsible for furnishing the supplies and services to the contract buyer, the contract seller shall attach to the preneed funeral contract a copy of the contract seller's agreement with the contract provider.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2820 18VAC65-30-230	Complies with all disclosure requirements imposed by the Board. (Question and answer format required.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-120	<b>Escrow account:</b> Within five banking days after the day of receipt of any money from the contract buyer and until the time the money is invested in a trust, life insurance, or annuity policy, the contract seller or the contract provider shall deposit the money into an escrow account in a bank or savings institution approved to do business in the Commonwealth.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-130	<b>Real Estate</b> 1. The preneed contract shall be recorded as an attachment to the deed whereby the real estate is conveyed; and 2. The deed shall be recorded in the clerk's office in the circuit court of the city or county in which the real estate being conveyed is located.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-140	<b>Personal Property</b> 1. Personal property shall be transferred by: a. Actual delivery of the personal property; or b. Transfer of the title to the personal property. 2. Within 30 days of receiving the personal property or the title to the personal property, the licensee or person delivering the property shall: a. Execute a written declaration of trust setting forth the terms, conditions, and considerations upon which the personal property is delivered; and b. Record the trust agreement in the clerk's office of the circuit court of the locality in which the person delivering the property is living; or c. Record the preneed contract in the clerk's office of the circuit court of the locality in which the person delivering the property or trust agreement is living provided that the preneed contract sets forth the terms, conditions, and considerations of the trust.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	§54.1-2820 18VAC65-30-170	States if funds are required to be trusted pursuant to § 54.1-2822, the amount to be trusted, the name of the trustee, the disposition of the interest, the fees, expenses and taxes which may be deducted from the interest and a statement of the buyer's responsibility for taxes owed on the interest.  If funds are to be <b>trusted</b> , the following information shall be disclosed in writing to the contract buyer: 1. The amount to be trusted; 2. The name of the trustee; 3. The disposition of the interest; 4. The fees, expenses, and taxes which may be deducted from the interest; 5. Whether up to 10% is retained by the contract provider; and 6. A statement of the contract buyer's responsibility for taxes owed on the interest.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18VAC65-30-180	If a <b>life insurance or annuity policy</b> is used to fund the preneed funeral contract, the contract shall contain the following information: 1. Name of the contract provider; 2. Name and funeral license number of contract seller; 3. Place of employment of contract seller; 4. Name of insurance agent and agent's insurance license number; 5. Insurance agent's employer and insurance company represented by insurance agent; and 6. Identification as to whether the insurance agent is a funeral service licensee and, if so, the funeral service license number.

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**Comments:**

**Attachments:**

GPL    CPL    OBCPL    Itemized Statement    Preneed list    Other

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Signature of Inspector

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Signature & Title of Establishment Representative

**This facility has been inspected by an inspector of the Department of Health Professions. The results of the inspection have been noted. I acknowledge that the noted conditions have been deemed by the inspector as not being in compliance and have been explained to me.**