

33. Has your company recovered all of its original perpetual care trust fund deposits under § 54.1-2321 of the *Code of Virginia*?

Yes

No If no, enter the amount of the trust that has not yet been recovered. _____

34. 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 application. I will notify the Department if the company, company officers or directors, or compliance agent is subject to any disciplinary action or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to receiving the requested license. I also 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 of Officer, Director or Compliance Agent

Date

* State law requires every applicant for a license, certificate, registration, or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

A COMPLETED PERPETUAL CARE TRUST FUND TRUSTEE VERIFICATION MUST ACCOMPANY THIS APPLICATION.

APPLICATIONS AND SIGNATURES MUST BE ORIGINAL. FASCIMILE TRANSMISSIONS AND COPIES WILL NOT BE ACCEPTED.