

REQUEST FOR CHANGES PURSUANT TO G.S. 150B-21.10

AGENCY: N.C. Board of Funeral Service

RULE CITATION: 21 NCAC 34B .0619

DEADLINE FOR RECEIPT: MARCH 31, 2025

PLEASE NOTE: *This request may extend to several pages. Please be sure you have reached the end of the document.*

The Rules Review Commission staff has completed its review of this Rule prior to the Commission's next meeting. The Commission has not yet reviewed this Rule and therefore there has not been a determination as to whether the Rule will be approved. You may email the reviewing attorney to inquire concerning the staff recommendation.

In reviewing this Rule, the staff recommends the following changes be made:

Generally, to the Rule: Paragraph (c) sets forth the procedure for naming the "replacement manger." What is the procedure for naming the initial manager? Consider striking "replacement."

Lines 8 and 12: Change "must" to "shall."

Lines 21 and 23: Consider whether "in accordance with" is superior to "satisfying."

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

21 NCAC 34B .0619 is adopted as published in 39:12 NCR 770-771 as follows:

21 NCAC 34B .0619 CHANGE OF FUNERAL ESTABLISHMENT MANAGER

(a) Funeral establishments as defined by G.S. 90-210.20(h) and individuals or entities to whom the Board has issued a permit to engage in the practice of funeral service pursuant to G.S. 90-210.25(a2)(2) (“Unaffiliated Practices”) shall have in charge a manager licensed by the Board for the practice of funeral directing or funeral service, in accordance with G.S. 90-210.25(d)(2).

(b) Funeral establishments and Unaffiliated Practices must notify the Board by email to permitapplications@ncbfs.org within five (5) days of its licensed manager ceasing his or her service as licensed manager.

(c) To register the name of a replacement manager with the Board, funeral establishments and Unaffiliated Practices must submit by email to permitapplications@ncbfs.org a form containing the following information:

(1) The name of the funeral establishment or Unaffiliated Practice;

(2) The permit number of the funeral establishment or Unaffiliated Practice;

(3) The name and license number of the funeral director or funeral service licensee being named as manager of the funeral establishment or Unaffiliated Practice;

(4) The effective date of replacement manager’s appointment as manager;

(5) Whether the outgoing manager still is employed by the funeral establishment or Unaffiliated Practice;

(6) The name and license number of the sole proprietor, partner, LLC member, or corporate officer satisfying the requirements of G.S. 90-210.27A(e);

(7) The dated signature of the replacement manager; and

(8) The dated signature of the sole proprietor, partner, LLC member, or corporate officer satisfying the requirements of G.S. 90-210.27A(e).

History Note: Authority G.S. 90-210.23(a); 90-210.25(d)(2)

Eff. ____