



Department of Commerce

Division of Real Estate &
Professional Licensing
77 South High Street, 20th Floor
Columbus, Ohio 43215-6133

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John R. Kasich, Governor

Jacqueline T. Williams, Director

Anne M. Petit, Superintendent

CEMETERY

Burial Permit Fee Report

For Division Use Only

File Number:	Fee Number:
Date Received:	Fee Amount:
Registration District:	Action:

Section A: Registrar/Sub-registrar Information.

File Number:	Name:		
District Number:	County:	City:	
Name of Contact Person:			Phone Number:
Email Address:			

Section B: Report Period.

Reporting Period (e.g. 1/1/2013 – 1/31/2013):

Section C: During the reporting period listed in Section B, please complete the following table.

1)	Number of Permit Issued:	
*2)	Number of Exempt Permits Issued:	- _____
3)		Total Number of Chargeable Permits
4)	x	<u>\$2.50</u> Cost Per Permit
5)	Total Amount Due:	

**This is the number of burial permits fees exempted pursuant to Ohio Health Department rules.*

Section D: Submission.

- A check or money order made payable to the Ohio Division of Real Estate in the amount stated in Section F **MUST** accompany this report.
- This report is to be completed on a **MONTHLY** basis, even if you have not issued any burial permits during the month.
- If multiple sub-registrar are reporting through one local registrar, please ensure that all reports are sent with the fee share check to the address below:

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77 S High St., 20th Fl.
Columbus, OH 43215

THIS REPORT MAY BE REPRODUCED AS NECESSARY