Oregon Mortuary and Cemetery Board 800 NE Oregon Street, Suite 430 Portland OR 97232-2195 mortuary.board@state.or.us www.oregon.gov/MortCem phone 971-673-1507 / fax 971-673-1501

APPLICANT FACILITY OWNER INFORMATION SHEET

If the applicant facility is owned by more than one level of ownership, this form needs to be completed and submitted with the facility application. This form may be duplicated for each level of ownership.

(1, 11 ₁	print true owner name(s) print mailing address of owner										
							owner's phone number		fa	x number	e-mail address
							print contact name				phone number
NO	TE: Is the above named applica	nt facility owner public	cly trac	led? (Yes / No) If yes, do	not complete sections below						
В. А	pplicant Owner's Officers, D	irectors, Board Mem	bers,	Commissioners, etc.:							
1			2								
1	print name and title		۷	print name and title							
3	print name and title		4	print name and title							
5											
5	print name and title		0	print name and title							
7											
,	print name and title		0	print name and title							
	thers who have decision-make facility (i.e., General Market print name and title				trol over the operation of phone						
	print name and title	address			phone						
	ndividual stockholders (naturation the above named owner, inc	al persons), partner			•						
1	·		2								
	print true name	%		print true name	%						
3			4								
	print true name	%	_	print true name	%						
5			6								
3	print true name	%	0	print true name							