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**BRANCH ESTABLISHMENT SELF INSPECTION REPORT**

License #:	Phone #:
Establishment Name:	
Address:	
City/State/Zip	
Manager's Name:	
Name of Affiliated Funeral Establishment:	

**SECTION A**

**Check YES, if you meet the regulation and No if you do not meet the regulation; if you mark NO, you must provide an explanation.**

#	Regulation	Requirement	Yes	No (If marked no, you must provide an explanation)
1	68-009.01 Documents Reviewed	<b>Documents must be posted and/or available as follows:</b>		
		The current license of the establishment must be conspicuously displayed;		
		The current license of the manager and all licensed funeral directors and licensed funeral directors and embalmers employed by the funeral establishment must be conspicuously displayed;		
		A sign which displays the name of the current or proposed branch establishment. The sign must be located on or at the front of the building in a position where it clearly is visible and legible from the outside of the building, or provide documentation that it is on order; and		
		If funeral arrangements are made at the branch location, copies of written statements containing a list of principal services and furnishings to be supplied by the funeral director or funeral director and embalmer for the preparation and burial or cremation of a deceased body (i.e., general price list).		
2	68-009.02 Physical Structure	The physical structure must be maintained to ensure safety of the public and compliance with the equipment and sanitation requirements. The physical structure must have: <ol style="list-style-type: none"> <li>1. Adequate ventilation;</li> <li>2. Adequate lighting to maintain public safety; and</li> <li>3. If viewing of the deceased body is provided at the branch location, the viewing room(s) must have floor to ceiling walls on all sides;</li> </ol>		
3	68-009.03 Casket Selection Area	If the branch establishment has a casket selection area, the area may include a catalogue or electronic media for ordering caskets or have sample caskets displayed.		

<b>Date and Signature:</b>	
Date of Inspection	_____
Signature of Manager	_____