



Ohio Department of Commerce

The Division of Real Estate & Professional Licensing

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Ohio Revised Code Chapter 4767 provides the Ohio Cemetery Dispute Resolution Commission with responsibility over registered cemeteries operated by a person, church, religious society, established fraternal organization, or political subdivision. The Commission is vested with the authority to assist in resolving complaints by the use of informal techniques of mediation, conciliation, and persuasion. The Division of Real Estate and Professional Licensing, provides administrative services to the Commission regarding the registration of active cemeteries and processing of complaints filed against any cemetery owner or operator for dispute resolution.

Anyone filing a complaint with the Division of Real Estate and Professional Licensing should be aware that if a violation of Ohio cemetery law is believed to have been committed, the Division and the Commission only have the ability to refer the complaint to a prosecutor's office that has jurisdiction over the matter or the Ohio Attorney General's Office for alleged violations of the Ohio Consumer Sales Practices Act. Neither the Division nor the Commission has authority to award monetary damages or make burial right determinations. Any such action must be initiated in a court of law. Additionally, Ohio law prohibits the Division from giving private legal advice or opinions. If legal advice is desired, please consult with an attorney.

When the Division or the Commission initiates an investigation, it is not assumed that a violation of cemetery law has occurred or that anyone will be charged with a violation. Only after reviewing the evidence obtained from an investigation will the Division or the Commission decide whether or not to allege the existence of a violation and refer the matter to a prosecutor's office or the Ohio Attorney General.

FILING A COMPLAINT

The Division requires all complaints be filed in written form and signed by the complainant. Upon receipt of a complete complaint form, the cemetery section reviews the matter to determine if it falls under the Division's jurisdiction. For such jurisdiction to exist, the complaint must concern the conduct of a cemetery registered with this division.

If such a determination is made, the Division acknowledges receipt of the complaint by sending written notice to the complainant not more than twenty days after its receipt, and sends written notice to the person responsible for the operation of the cemetery that is the subject of the complaint within seven days after its receipt.

Before taking further action, the Division allows the owner or the person responsible for the operation of the cemetery thirty days to respond to the Division with respect to the complaint. Any response or offer to resolve the complaint submitted by the cemetery owner or operator to the Division is forwarded for response and comment to the complainant. The Cemetery Dispute Resolution Commission hears each complaint within one hundred eighty days after filing unless it has, in the interim, been resolved by the parties.

Only after the review of the information and documentation from an investigation or hearing (before the Ohio Cemetery Dispute Resolution Commission) can the allegation of violations of any cemetery laws be referred by the Commission, to the Ohio Attorney General's office or to the prosecutor's office that has jurisdiction over the matter.

The Commission, at any time, may dismiss a complaint if it determines there is not good cause shown for the complaint. If the Commission dismisses a complaint, it shall notify the person who filed the complaint within twenty days of reaching its decision and identify the reason why the complaint was dismissed.

Record your complaint on the following form. It is interactive, so please record your responses directly onto the form. You may then print and sign the form, attach copies (not originals) of pertinent documents, and mail the package to the Division's office. The Division does not except electronic filings.

FINANCIAL INSTITUTIONS

INDUSTRIAL COMPLIANCE

LABOR & WORKER SAFETY

LIQUOR CONTROL

REAL ESTATE & PROFESSIONAL LICENSING

SECURITIES

STATE FIRE MARSHAL

UNCLAIMED FUNDS

"An Equal Opportunity Employer and Service Provider"

CEMETERY COMPLAINT FORM

INSTRUCTIONS

This form is interactive. You may, before printing it, enter your responses directly onto the form.

1. This form should be used when filing a complaint for dispute resolution against the activity, practice, policy, or procedure of a cemetery, or regarding an alleged violation by any person operating or maintaining a cemetery.
2. Please fill in each field to the best of your knowledge. This will help expedite the process. *If completing by hand, please print using blue or black ink.*
3. State facts clearly and briefly. An investigator will follow-up with you for any further clarification.
4. Furnish the full names, addresses and phone numbers of all parties to the complaint, including witnesses.
5. Print the form. **Sign and date the form at the bottom.** Attach copies (not originals) of all pertinent documents, and send the package to the address listed above.

NOTE: This complaint will become public record. A copy will be given to the party against whom the complaint is filed. Persons who file complaints will be notified to appear before the Ohio Dispute Resolution Commission if the complaint is not resolved. The Commission has no authority to award monetary damages or determine burial rights.

FOR DIVISION USE ONLY		
COMPLAINT NUMBER	CEMETERY REG. NUMBER	
OWNER NUMBER	TOWNSHIP OF CEMETERY	
PROPER NAME OF OPERATOR		
ADDRESS OF OPERATOR		
CITY	STATE	ZIP CODE + 4

COMPLAINANT INFORMATION			
YOUR FULL NAME (identifies you as Complainant)			
HOME ADDRESS (line 1)			HOME PHONE NUMBER ()
HOME ADDRESS (line 2)			
CITY	COUNTY	STATE	ZIP CODE + 4
BUSINESS NAME			
BUSINESS ADDRESS (line 1)			BUSINESS PHONE NUMBER ()
BUSINESS ADDRESS (line 2)			FAX NUMBER ()
CITY	COUNTY	STATE	ZIP CODE + 4

RESPONDENT INFORMATION (against whom this complaint is being filed)			
CEMETERY OWNER OR OPERATOR FULL NAME (identifies person as Defendant)			TOWNSHIP OF CEMETERY
CEMETERY NAME			BUSINESS PHONE NUMBER ()
CEMETERY ADDRESS (line 1)			FAX NUMBER ()
CITY	COUNTY	STATE	ZIP CODE + 4
CEMETERY MAILING ADDRESS (line 1) if different from above address			BUSINESS PHONE NUMBER ()
CEMETERY MAILING ADDRESS (line 2)			FAX NUMBER ()
CITY	COUNTY	STATE	ZIP CODE + 4
NAME(S) OF ANY CEMETERY EMPLOYEE(S) WITH WHOM YOU HAVE DEALT			
EMPLOYEE 1	EMPLOYEE 2	EMPLOYEE 3	
COMPLAINT			
ARE YOU AN OWNER OF GRAVE SPACES, MAUSOLEUMS, CRYPTS OR NICHES IN THE CEMETERY? YES NO (if yes, indicate the date you acquired ownership in the next field)			DATE OF ACQUISITION
HAVE YOU INCLUDED DOCUMENTS PERTAINING TO THE COMPLAINT? YES NO			
HAVE YOU CONSULTED AN ATTORNEY REGARDING YOUR COMPLAINT? YES NO (if yes, complete the following fields)		ATTORNEY NAME	
ATTORNEY ADDRESS			PHONE NUMBER ()
CITY	STATE	ZIP + 4	FAX NUMBER ()
HAVE ANY CLAIMS BEEN FILED IN A COURT OF LAW? YES NO (if yes, complete the following fields)		NAME OF COURT (e.g. Franklin County Court of Common Pleas)	
NAME OF CASE		DOCKET NUMBER	
PRIOR NOTIFICATION			
HAVE YOU PREVIOUSLY NOTIFIED THE RESPONDENT OF YOUR COMPLAINT? YES NO		IN WHAT FORM WAS YOUR NOTIFICATION? ORAL WRITTEN (if written, include a copy)	
DID YOU RECEIVE A RESPONSE? YES NO		IN WHAT FORM WAS THE RESPONSE? ORAL WRITTEN (if written, include a copy)	
IF RESPONSE WAS ORAL, WHAT WAS THE RESPONSE?			

DESCRIPTION OF COMPLAINT

IN THE FORM OF A BRIEF STATEMENT, GIVE THE DETAILS OF YOUR COMPLAINT. BE FACTUAL AND COMPLETE. ATTACH ADDITIONAL SHEETS IF NECESSARY.

THE UNDERSIGNED HEREBY DECLARES THAT THIS STATEMENT IS TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

SIGNATURE OF COMPLAINANT

DATE