

COMMONWEALTH OF VIRGINIA Board of Pharmacy

9960 Mayland Drive, Suite 300 Henrico, Virginia 23233 www.dhp.virginia.gov/pharmacy (804) 367-4456 (Tel) (804) 527-4472 (Fax) pharmbd@dhp.virginia.gov (email)

APPLICATION FOR A FACILITY PERMIT FOR PRACTITIONER(S) OF THE HEALING ARTS TO SELL CONTROLLED SUBSTANCES

Check Appropriate Box(es):

New, more than one practitioner selling at location ¹	\$240.00	Change of location of selling area ¹	\$150.00
New, only one practitioner selling at location ¹	No fee	Remodel of selling area ¹	\$150.00
Reinstatement (may require reinspection fee also) ³	\$240.00	Reinspection ¹	\$150.00
Reinstatement after suspension or revocation ³	\$500.00	Change in designated practitioner ²	No fee

Application fees are not refundable. Applications are valid for one year from the date of receipt. The required fees must accompany the application. Make check payable to "Treasurer of Virginia".

Applicant—Please provide the information requested below. (Print or Type) Use full name not initials

Name of Facility	Area Code and Telephone Number	
Street Address Where Applicant Wishes to Sell Controlled Substances	Area Code and Fax Number	
City	State	Zip Code
If a current facility permit to sell controlled substances is held, indicate the permit number:	Area Code and Telephone Number (currently working number)	
Print Name of the Responsible Designated Practitioner for Facility ²	Medical License Number	
License Number of the Designated Practitioner to Sell Controlled Substances 0213-	Email Address of Responsible Designated Practitioner for Facility	
Signature of the Responsible Designated Practitioner for Facility	Date	
Expected Hours of Operation	² Effective Date of Change	
Expected Opening, Moving, or Completion Date	Requested Inspection Date	

³ REINSTATEMENT ONLY:				
Have controlled substances been sold from the location at the address on this application during the time facility permit was lapsed? Yes No If yes, attach explanation.	that the			

¹A 14-day notice is required for scheduling a new, change of location, or remodel inspection and for a reinspection. Drugs may not be stocked prior to inspection and approval of the drug selling and storage area.

²18 VAC 110-30-70 requires a facility with a permit for practitioners of the healing arts to sell controlled substances to designate a practitioner with a license to sell controlled substances who shall be the primary person responsible for the stock, the required inventory, the records of receipt and destruction, safeguards against diversion and compliance with the chapter.

An inspector will call prior to the requested date to confirm readiness for inspection. If the inspector does not call to confirm the date, the responsible party should call the Enforcement Division at (804) 367-4691 to verify the inspection date with the inspector.

FOR OFFICE USE ONLY:					
Date processed:	Check No:	Receipt No:	Application No:		
Assigned Inspection Date ³ :	Date Inspected:	Reviewed By:	Date Reviewed:		
Date Issued:	Permit Number 02	Date Scanned to Enforcement:	Date Scanned to MLO:		