



Janet T. Mills
Governor

STATE OF MAINE
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION
BOARD OF PHARMACY



Joan F. Cohen
Commissioner

When applying for a Mail Order license, disclosure of a Drug Enforcement Administration (“DEA”) Registration Number is mandatory pursuant to Board Rule Chapter 11, Section 1(E). Applicants for licensure who do not have a DEA Registration Number *must* complete this form and upload it with their application.

Name of Company:	
Maine License Number:	DEA Number (if applicable)

☐ I hereby certify that I do not have a DEA Registration Number and that I am ineligible to obtain one because:

☐ I understand that if I obtain a DEA Registration Number, I have an obligation to provide that information to the Maine Board of Pharmacy within 10 days of receipt of such registration. I understand that disciplinary action against my license could result if I do not provide my DEA Registration Number.

☐ I hereby certify that the above information is true and accurate. I understand and acknowledge that failure to disclose the requested information or disclosure of false or misleading information may constitute misrepresentation that could result in the denial or nonrenewal of licensure or other disciplinary action up to and including revocation.

Signature of Affiant

Date

Office Location: 76 Northern Avenue, Gardiner, Maine 04345
Mailing Address: 35 State House Station, Augusta, Maine 04333
[Board of Pharmacy | Office of Professional and Occupational Regulation](#)

Phone: (207) 624-8651

TTY: Please Call Maine Relay 711

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