



**Arizona State Board of Pharmacy**  
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FOR AGENCY USE ONLY			
Permit No.:	Fee:	Check No.:	Receipt No.: 20

Rev. 8.24.21

### 3PL Permit Renewal Application

To renew your 3PL permit, complete and submit this form with the 3PL permit renewal fee (see fee information below).

You must provide a response to each question. You may answer none or "N/A" if it is the correct response. If you fail to answer all of the questions, your application will be returned to you. If you fail to provide sufficient supporting documentation, staff will send you a deficiency notice and your application will remain "In Progress" until staff receives all required documentation.

If you answer "Yes" to any of the regulatory questions, your application may require Board review. Please allow time for the processing of such applications.

1. Business Name \_\_\_\_\_
2. Permit No. \_\_\_\_\_ 3. FEIN \_\_\_\_\_
4. DEA Registration Number (If Applicable) \_\_\_\_\_
5. **Physical Address**  
 Address \_\_\_\_\_ Unit/Suite No. \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
6. **Mailing Address**                      Check if mailing address is the same as above  
 Address \_\_\_\_\_ Unit/Suite No. \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
7. Phone Number \_\_\_\_\_ 8. Fax Number \_\_\_\_\_
9. Email Address \_\_\_\_\_

Regulatory Questions

10. Since this permit was last renewed, has the owner, any officer or active partner been convicted of an offense involving moral turpitude, a felony offense, or any drug-related offense or have any currently pending felony or drug-related charges? If yes, provide full details, which must include the charge, conviction date, jurisdiction and location.  

Yes                      No

11. Since this permit was last renewed, has any formal disciplinary action been taken against the facility at this permitted location at either a state or federal level? If yes, provide full details, which must include the nature and date of each action and the state or jurisdiction involved. You must also provide copies of the orders relating to each disciplinary action.

Yes No

12. Since this permit was last renewed, has the owner, any officer or active partner been denied a permit for the facility at this permitted location in this state or any other jurisdiction? If yes, provide full details, which must include the state or jurisdiction and the date of the denial. You must also provide a copy of the order or letter of denial.

Yes No

13. Since this permit was issued, has there been a change of ownership of 30% or more in voting stock or vested interest that has direct operational oversight? If yes, your renewal application will not be considered complete until you submit a new permit application.

Yes No

14. Designated Representative Information

a. Name \_\_\_\_\_

b. Emergency Phone Number \_\_\_\_\_

c. Is this a new Designated Representative? If yes, please provide a copy of the Designated Representative's resume and fingerprint clearance card.

Yes No

d. Has the Designated Representative ever been convicted of a criminal offense under any federal, state or local laws relating to wholesale or retail prescription or over-the-counter dangerous drugs or dangerous devices distribution or the distribution of controlled substances? If yes, provide full details, which must include the charge, conviction date, jurisdiction and location.

Yes No

I declare, under penalty of perjury, under the laws of the state of Arizona, that the information I have provided in this application is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Pursuant to section 41-1093.01, Arizona Revised Statutes, an agency shall limit all occupational regulations to regulations that are demonstrated to be necessary to specifically fulfill a public health, safety or welfare concern. Pursuant to sections 41-1093.02 and 41-1093.03, Arizona Revised Statutes, you have the right to petition this agency to repeal or modify the occupational regulation or bring an action in a court of general jurisdiction to challenge the occupational regulation and to ensure compliance with section 41-1093.01, Arizona Revised Statutes.

### **3PL PERMIT RENEWAL FEE**

The renewal fee for 3PL permits expiring on October 31, 2021 is \$1,000.00. If your permit expired before October 31, 2021, please contact the Board office for the correct fee.

Renewals completed after October 31, 2021 are subject to a late renewal penalty. The penalty fee is ½ of the renewal total, not to exceed \$350.00.

Renewal fees are payable by debit or credit card through the online renewal system only. Payments made by mail may only be made by check or money order payable to the Arizona State Board of Pharmacy. We DO NOT accept cash.