



**THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234**

NEW YORK STATE BOARD OF PHARMACY, Lawrence H. Mokhiber, Executive Secretary  
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NAME TO REGISTER: \_\_\_\_\_

**CHECKLIST FOR PRELIMINARY REGISTRATION OF A PHARMACY**

Please use this form as a check off list to indicate what is enclosed. Make a copy and return this list with the application.

- \_\_\_\_\_ 1. Completed "Application for Initial Registration or Transfer of Ownership of M/W" Form (MW-100)
- \_\_\_\_\_ 2. Completed " M/W Information Form" (MW 111)
- \_\_\_\_\_ 3. Complete Diagram on MW 111, indicate total registered area (highlight registered area if not the whole building).  
Indicate surrounding businesses on this diagram.
- \_\_\_\_\_ 4. Complete the M/W Supervisor Application (M/W 104)
- \_\_\_\_\_ 5. Check for \$825.
- \_\_\_\_\_ 6. The Certificate of Incorporation (corporation) or Articles of Organization. (LLC) or Partnership Agreement stating the name and purpose of the corporation/LLC/partnership. **THIS IS THE NAME YOU MUST REGISTER. PLEASE IDENTIFY YOUR ESTABLISHMENT BY THIS NAME WHENEVER YOU CORRESPOND WITH THIS OFFICE.**
- \_\_\_\_\_ 7. Filing Receipt from Secretary of State for Certificate of Incorporation or Articles of Organization.
- \_\_\_\_\_ 8. Documentation/ Minutes indicating the officers or partners. (please highlight this area of the document or minutes)
- \_\_\_\_\_ 9. Documentation/ Minutes indicating the stock distribution, number of shares must be shown for principle owners of more than 10% of stock. (please highlight this area of the minutes)
- \_\_\_\_\_ 10. Copies of signed and dated issued share certificates.
- \_\_\_\_\_ 11. Photo ID's: copy of Driver's License or Passport of owners/officers/partners
- \_\_\_\_\_ 12. Certificate of Occupancy
- \_\_\_\_\_ 13. Photos of all outside signs on the registered establishment
- \_\_\_\_\_ 14. Photo of the **REGISTERED NAME OF THE CORPORATION, LLC OR PARTNERSHIP ON THE EXTERIOR.**

**DEED, LEASE OR ASSIGNMENT OF LEASE MUST BE TO THE REGISTERED ESTABLISHMENT:**

- \_\_\_\_\_ 15. Deed or Lease **TO THE REGISTERED NAME OF THE CORPORATION, LLC OR PARTNERSHIP**

**IF A LEASE IS TO A PARENT COMPANY OR PREVIOUS OWNER:**

- \_\_\_\_\_ Assignment of lease for the premises where applicable to the **NAME OF THE CORPORATION YOU ARE REGISTERING**

**LABEL IS NEEDED FOR MANUFACTURERS, PRESCRIPTION REPACKERS, AND REPACKERS OF GASES.**

- \_\_\_\_\_ Final product label with **REGISTERED NAME OF THE CORPORATION, LLC OR PARTNERSHIP**

**MANUFACTURES AND REPACKERS:**

- \_\_\_\_\_ Verification that the establishment is properly registered with the Food and Drug Administration (FDA), if required. (Copy of Form 2656 or 2656e)

**TRANSFER OF OWNERSHIP:**

- \_\_\_\_\_ "Bill of Sale" before the registration can be issued
- \_\_\_\_\_ a merger requires legal papers indicating the merger
- \_\_\_\_\_ transfer of ownership to an estate requires a letter of testamentary or letter of administration from the Surrogate's Court.

**BUSINESSES USING AN ASSUMED NAME:**

- \_\_\_\_\_ Certificate of Assumed Name.
- \_\_\_\_\_ Filing Receipt for Assumed Name.

**OUT OF STATE BUSINESS:**

- \_\_\_\_\_ Filing receipt for authority to do business in New York State.
- \_\_\_\_\_ Filing receipt to do business in the state of origination.

After your application is reviewed by this office, you will be mailed a letter with instructions to call the office of professional discipline to schedule an appointment for an inspection of your establishment. Every establishment must be inspected.