



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BUREAU OF NARCOTICS AND DANGEROUS DRUGS
REQUEST FOR CHANGE IN REGISTRATION

PRINTED NAME OF REGISTRANT REQUESTING CHANGE	SIGNATURE OF REGISTRANT APPROVING CHANGE
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CURRENT REGISTERED PRACTICE LOCATION

CHANGE OF PRACTICE ADDRESS REQUEST **PRIMARY LOCATION** **SECONDARY LOCATION**

PRIOR PRACTICE ADDRESS _____	NEW PRACTICE ADDRESS _____
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DATE YOU MOVED/CHANGED	NEW TELEPHONE NUMBER
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MAILING ADDRESS _____	NEW FAX NUMBER
	CURRENT BNDD REGISTRATION NUMBER

CHANGE OF REGISTRANT NAME **CHANGE OF EMAIL ADDRESS**

CHANGE MY NAME TO	
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CHANGE IN DRUG SCHEDULES – SCHEDULES MAY BE ADDED OR REMOVED

SCHEDULES

SCHEDULE 2 ADD REMOVE

SCHEDULE 3 ADD REMOVE

SCHEDULE 4 ADD REMOVE

SCHEDULE 5 ADD REMOVE

Pursuant to Missouri law, a registration may only be amended if it is an active and current registration. A closed registration cannot be amended. A registration may only be issued at a Missouri practice location where patient care occurs and controlled substance activities take place. A physical street address is required and not a P.O. Box.

The Bureau of Narcotics and Dangerous Drugs will update the registration for no fee as authorized by law. The amended registration will appear online at the bureau's website www.health.mo.gov/safety/bndd where a registrant can verify and print a certificate.

This form may be sent to:

B.N.D.D.
 P.O. BOX 570
 JEFFERSON CITY, MO 65102-0570
 FAX: (573) 526-2569
 EMAIL: BNDD@health.mo.gov