

RENEWAL/REINSTATEMENT FORM

LICENSE NUMBER	OCCUPATION / PROFESSION TITLE	RENEWAL FEE	EXPIRATION DATE REINSTATEMENTS	
Please fill in:	Pharmacist (\$73) Controlled Substance (\$78)	\$151.00	September 30 th of odd years Additional fees are required after expiration. See reverse for details.	
↓ NAME AND AI	DDRESS OF RECORD↓	↓ ADDRF	SS / PHONE CORRECTION \downarrow	
ame:		ls th	is a new address? ☐ Yes ☐ No	
ddress:			is a new address: Lifes Line	
	State: Zip:	This ir from D	This information will be used for all correspondence from DOPL. You may use a business address or PO Box instead of a home address. If your address	
		chang servic	es, notify DOPL directly. Do not rely on a posta e forwarding order. Submit changes to	
mail:		doplw	eb@utah.gov	
			estion. Do not leave any question blank.	
Tor questions 1 - 4 below, motor vehicle 1. Since a pl 2. Since a pl 2. Since a pl 3. Since a pl 4. Since a pl 5. Since a pl 6. Since a pl 7. Since a pl 8. Since a pl 9. Since a pl 1. Since	e offenses such as driving while impaired or intoxicated must be the last renewal or issuance of this license ea in abeyance to, or entered into a deferred sect the last renewal or issuance of this license has	be disclosed, but minor traffice have you pled guilty to intence with respect to a	riminal prosecution and are subject to random audit. offenses such as parking or speeding violations do not need to be listed.) to, pled no contest to, been convicted of, made any felony or misdemeanor in any jurisdiction? with or arrested for any felony or misdemeanor in	
3. Since	jurisdiction? the last renewal or issuance of this license has a second o	ave you surrendered or	had any disciplinary action taken against a	
Dyon Dine 4. Are	nse to practice in a regulated profession? you currently under investigation or is any discipance.	plinary, administrative,	or criminal action pending against you now by	
l ally	agency? TO QUESTION 1. 2. 3 OR 4 ABOVE. SEE #1	A ON PAGE TWO FOR	R INSTRUCTIONS ON ADDITIONAL REQUIREMENTS.	
☐ I am a foreign nati ☐ None of the above Driver's License of	State of issue old a US Driver's license or a US State ID, y	States ID/License Number ou must present a leg		
	nts(s) showing evidence of lawful presence			
AFFIDAVIT / SIGN	ATURE Read the following car	refully. Sign belo	w or follow the instructions as indicated.	
 I also certify that I have of or reinstatement of my lide I further certify that I am a for the renewal or reinstate correct, and is free of frait and will be available for it 	cense. I understand that I may be subject to a the licensee described and identified in this a atement of this license. To the best of my kno ud, misrepresentation, or omission of materia	ements, if applicable, if applicable, if audit by DOPL of having pplication for license wiledge, the information of the release of information the release of information the release of information.	including those specified below before the expiration ing met these requirements. renewal / reinstatement. I am qualified in all respects on contained in this application is complete and nat this application will be classified as a public recordation which is classified as controlled, private, or	
Social Security Number	r	-		
Signature:		Date:	(If unable to sign, see #1B on page 2 for instructions.)	
RENEWAL REQUIREMENTS Specific to your license: n accordance with Subsection R156-17b-309, during the past 2 years, you must have			Unlawful Conduct: Your license will automatically expire unless you renew it prior to its expiration date. If your license expires you may not practice until a	

completed 30 hours of ACPE approved qualified continuing professional education of which a minimum of 12 hours must be obtained through attendance at live or technology enabled participation lectures, seminars or workshops, a minimum of 15 hours must be in drug therapy or patient management, and a minimum of 1 hour must be in pharmacy law or ethics. If you received your initial license during the current renewal cycle, you must only complete a pro-rata amount of qualified professional education for the time you were actually licensed. DO NOT submit documentation of your completed hours unless you are audited and requested to do so.

new license is issued.

Subsection <u>58-1-501(1)(a)</u> and Section <u>58-1-502</u>, U.C.A., make it unlawful and punishable as a criminal offense to practice your occupation or profession beyond the expiration of your license.

ADDITIONAL REQUIRED DOCUMENTATION

- A. If you answered "yes" to question 1, 2, 3, and/or 4 on the first page of this renewal, you must submit complete documentation – including a personal narrative and any police arrest report, court docket, probation/parole officer report, diversion agreement, and/or plea in abeyance agreement – for each and every arrest, charge, and/or conviction.
- B. If you cannot sign the Affidavit on the first of this renewal, you must submit a complete written explanation of why you cannot sign. If applicable, this explanation must include the reasons you have not or will not complete the continuing education requirements before the expiration or reinstatement of your license. DOPL personnel will reach a renewal decision on a case-by-case basis after a thorough review of your explanation. Additionally, you may be requested to provide additional information if the documentation submitted is insufficient.

CHECKLIST FOR TIMELY RENEWAL / REINSTATEMENT BY MAIL

Answer all four of the certification questions on page 1 and provide additional documentation, if applicable (#A above).
Sign the Affidavit on page 1 or submit a complete explanation of why you cannot sign (#B above).
Pay the correct fee. If reinstating a license after the expiration date, you must pay an additional reinstatement fee.
Sign your check or money order. DO NOT SEND CASH. (Make checks or money orders payable to "DOPL.")
Enclose documentation of your legal name change, if applicable.
Mail all fees, forms, and documentation to DOPL at PO Box 146741, Salt Lake City, UT 84114-6741.

LEGAL NAME CHANGE: If your legal name has changed, you must verify the change by submitting a copy of a marriage certificate, divorce decree, court order, social security card, or contractor name change form. If your name change represents a new business entity, you must submit a new application for licensure before beginning practice as the new entity.

ADDRESS OR EMAIL CHANGE: You must keep your address current with DOPL, including your email address. You cannot rely on postal service forwarding. Submit changes online at www.dopl.utah.gov. (If licensed as an entity, including sole proprietor, you must also notify the Utah Division of Corporations of any change: (801) 530-4849.)

TIMELY RENEWAL: You are responsible to comply with all renewal / reinstatement requirements stated in statute and rule. Your license will automatically expire unless you renew it prior to its expiration date. Therefore, you are encouraged to immediately submit a completed Application for License Renewal / Reinstatement. You can save time by renewing online at www.dopl.utah.gov where you can immediately print out a confirmation of renewal.

APPLICATION APPROVAL: Your application will be approved unless you do not meet the renewal / reinstatement requirements or have engaged in serious misconduct. Licenses with specific requirements listed on page 1 of this form may be subject to audit by DOPL. Those selected for audit will be notified. Please note that DOPL reserves the right to initiate action at any time against a licensee who did not meet the renewal / reinstatement requirements at the time the license was issued.

NON-REFUNDABLE FEES: Renewal fees paid with this application are for processing your request for renewal of licensure and are non-refundable. Please be aware that simply paying the fees does not mean that your license will be automatically renewed unless you meet the current renewal requirements and thereby qualify for a renewed license.

REINSTATEMENT FEES: If you fail to timely renew your license, you will be subject to the following conditions:

- If you are reinstating your license within 30 days after the expiration date of your license, you must submit the renewal fee PLUS an additional \$20.00 for EACH license being reinstated.
- If you are reinstating your license after 30 days and within two years of the expiration date of your license, you must submit the renewal fee PLUS an additional \$50.00 for EACH license being reinstated. (Reinstating Lien Recovery Fund members must also submit another \$50.00 in addition to any special LRF assessments.)
- Fees are subject to change each July 1. If listed, the fees on the application are current at the time printed. Please verify the current fee at www.dopl.utah.gov if applying for reinstatement more than one year following expiration of your license.

NOTICE: If you fail to reinstate your license within two years of the expiration date of your license, you must submit a new application, meet current requirements for licensure, and pay the fees specified in subsection R156-1-308g (3). Contact DOPL for assistance if reinstating after two years of expiration.

ON-LINE RENEWAL INFORMATION: Most professional licenses can be renewed on-line at www.dopl.utah.gov by using a credit or debit card and a unique "Renewal ID Number" (similar to a pin number). This timesaving system allows for convenient license renewal. The updated license should be emailed to the email in your record on the next business day. Contact DOPL if you do not have a renewal ID number.

TAX ID NUMBER: The Tax ID Number for the Division of Professional Licensing is 87-6000545.