

Notification of Disciplinary Action

Persons licensed or certified by the Bureau of Narcotic Enforcement (BNE), must notify BNE of, "any charge or proceeding brought in any court or before any governmental agency, State or Federal, in which it is alleged that the licensee, its employees, subsidiaries, managing officers, or directors has failed to comply with the provisions of the Federal Controlled Substances Act or the law of any State relating to controlled substances." 10 NYCRR Part 80.110(b)

PRINT OR FILL IN USING ADOBE ACROBAT

Licensee Information

Legal Name _____
d/b/a _____
Street * _____
City _____
State _____ Zip _____ County _____
BNE Controlled Substance License # _____
DEA Registration if Applicable # _____
If not NYS License, Home State License #: _____

Contact Information

Contact Name _____
Title _____
Email _____
Telephone _____

Disciplinary Action Details

New Notification Update of Previously Submitted Notification Date of Incident: _____

Did the Incident Involve Controlled Substance Activities? Yes No

State Disciplinary Action(s) State(s) and Agency Name(s): _____

Federal Disciplinary Action(s) Federal Agency Name(s): _____

Are disciplinary action(s) still pending? Yes No

If No, what date was disciplinary action(s) finalized? _____

Have any of the following disciplinary action(s) been taken? Check all that apply.

Suspension Revocation Probation
Effective Date _____ Expiration Date _____

Submit the following with this form:

- Detailed statement of explanation
- Copies of any disciplinary documents
- Additional documentation to support the explanation with this form

Licensee Signature

Under the penalties of perjury, I affirm that the statements herein are true, to the best of my knowledge, and that I am knowledgeable regarding the requirements of the licensed activity for which I am applying or currently hold.

Name: _____ Date: _____

Signature of Licensee: _____ Title: _____
(Owner, Partner, COO, or Other Authorized Person) (Corporate Officer /Owner)

Submission

Submit this completed form and all supporting documentation to: bnlicensing@health.ny.gov.

Mail only if necessary to: New York State Department of Health
Bureau of Narcotic Enforcement
Attn: Licensing Unit
Riverview Center
150 Broadway
Albany, New York 12204