



STATE OF
OHIO
BOARD OF PHARMACY

Chemical Capture Attestation Form

To be used by an animal shelter or county dog warden licensed as a terminal distributor of dangerous drugs seeking a chemical capture classification ONLY. This form must be submitted electronically in the [eLicense system](#) using the following steps:

1. Log-in at www.elicense.ohio.gov
2. Navigate to the terminal distributor license tile, select the Options menu and **"Submit Additional Documentation"**.
3. Follow the prompts to upload and submit the file.

NOTE: The user will receive a confirmation screen once the request has been fully completed and submitted to the Board for review.

A step-by-step guide for uploading additional documentation to eLicense can be accessed here: www.pharmacy.ohio.gov/submitADD.

For more information on Ohio's chemical capture law, visit: www.pharmacy.ohio.gov/CCapture.



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Part 1 – Facility Information

Name of Facility (as it appears on the TDDD license)		
Address	City	Zip Code
Name of Responsible Person	TDDD No. (Leave Blank if New License Application)	

Part 2 – Certified Officer Information – *To qualify for a chemical capture classification under this section, an animal shelter or dog warden shall appoint or employ a certified officer that has completed training standards established in ORC [4729.534](#).*

A listing of approved chemical capture courses can be accessed here: www.pharmacy.ohio.gov/coursesCC (scroll to the bottom of the page).

First Name	Last Name	
Contact Phone	Contact Email	
Name of Chemical Capture Training Course Completed	Date of Completion	

Part 3 – Attestation by the Certified Officer - *To be completed by the Certified Officer (may be signed using a digital signature).*

I DECLARE UNDER PENALTIES OF FALSIFICATION AS SET FORTH IN CHAPTERS 2921. AND 4729. OF THE OHIO REVISED CODE THAT THE ANSWERS PROVIDED ON THIS FORM ARE **TRUE, CORRECT, AND COMPLETE.** I ALSO ATTEST THAT THE LOCATION LISTED IN PART 1 OF THIS FORM COMPLIES WITH THE CHEMICAL CAPTURE REQUIREMENTS IN CHAPTER 4729. OF THE REVISED CODE AND RULES ADOPTED THEREUNDER.

Signature of Certified Officer	Date Signed
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