



In-State Pharmacy Request to Store Records Off Site

Board of Pharmacy rules require all in-state pharmacies to obtain permission to store any required records off-site. This form must be submitted using the document upload feature on the Board of Pharmacy website: www.pharmacy.ohio.gov/upload. Be sure to select "Off-Site Records Storage" as the document type. **NOTE:** All other in-state Board of Pharmacy licensees (clinics, EMS, wholesalers) are required to submit notification of off-site storage. Only pharmacies require permission prior to moving records off-site.

Location Name	License No.
Street Address	Name of Responsible Person (RP)
City	RP Contact Phone (xxx-xxx-xxxx)
Zip Code	RP E-Mail Address

Be advised that the licensee and RP on the license is responsible for maintaining and securing all records regardless of where they are stored.

What is the name and address of the off-site storage facility where the licensee intends to store records of accountability?

Name of off-site storage facility		
Street Address	City	Zip

Provide a brief explanation of why you need to utilize off-site storage and how you intend to secure the records stored off-site.

This form must be submitted using the document upload feature on the Board of Pharmacy website: www.pharmacy.ohio.gov/upload.