

HME Service Provider - Notification of Off-Site Records Storage

Rule <u>4729:11-3-02</u> of the Ohio Administrative Code, requires all <u>in-state</u> HME service provider licensees and registrants to notify the Board of any required records stored off-site. This form must be submitted using the document upload feature on the Board of Pharmacy website: <u>www.pharmacy.ohio.gov/upload</u>. Be sure to select "Off-Site Storage of Records" as the document type.

License/Registration No.

Location Name

Street Address		Name of Desig	Name of Designated Representative (DR)	
City		DR Contact Pho	DR Contact Phone (xxx-xxx-xxxx)	
Zip Code		DR E-Mail Address		
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			y where the HME Service	
Provider intends to stor		ountability?		
Name of off-site storage fa	icility			
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.				
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www.pharmacy.ohio.gov/upload.