Mike DeWine, Governor Jim Tressel, Lt. Governor Steven W. Schierholt, Executive Director

## **HME Service Provider - Notification of Off-Site Records Storage**

## **Updated 1/17/2025**

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.

77 S. High Street, 17<sup>th</sup> Floor Columbus, OH 43215 U.S.A. Phone: 614 | 466 4143 Fax: 614 | 752 4836



## HME Service Provider – Notification of Off-Site Records Storage



**Instructions:** This form must be submitted using the document upload feature on the Board of Pharmacy website: <a href="www.pharmacy.ohio.gov/upload">www.pharmacy.ohio.gov/upload</a>.

Location Name		License/Registr	License/Registration No.		
Street Address		Name of Design	Name of Designated Representative (DR)		
City		DR Contact Pho	DR Contact Phone (xxx-xxx-xxxx)		
Zip Code		DR E-Mail Addre	DR E-Mail Address		
What is the name and to store records of acc	ountability?	f-site storage facilit	ty where the li	icensee intends	
Name of off-site storage	facility				
Street Address	City		Zip		
Provide a brief explar intend to secure the r			site storage ar	nd how you	