



**California State Board of Pharmacy**  
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Business, Consumer Services and Housing Agency  
Department of Consumer Affairs  
Gavin Newsom, Governor



**INSTRUCTIONS FOR (OPTIONAL) APPLICATION  
FOR A TEMPORARY RESIDENT / NONRESIDENT PHARMACY LICENSE  
(BPC § 4110)**

A temporary license may be requested when needed to protect public safety. A temporary license may be issued for a period not to exceed 180 days and may be issued subject to terms and conditions the Board deems necessary.

A temporary license application is not required to apply for a Community Pharmacy or Nonresident Pharmacy license. An application for a temporary license will be evaluated in conjunction with the review of the Community Pharmacy or Nonresident Pharmacy application. Submission of a temporary license application does not guarantee issuance of a temporary license.

If the Board determines a temporary license was issued by mistake or denies the application for a permanent license or registration, the temporary license or registration shall terminate.

To apply for a temporary pharmacy license, please submit the following to assist with the facilitation of the Board's review:

- 1. Application for A Temporary License: Community Pharmacy / Nonresident Pharmacy License Application (17A-101):** Complete this entire application and submit with original signatures.
- 2. Temporary License Fee \$325:** Include a check or money order for \$325.00 made payable to the California State Board of Pharmacy. This fee is nonrefundable.
- 3. Community Pharmacy Application (17A-4) or Nonresident Pharmacy Application (17A-57):** Complete the entire application and submit with original signatures.
- 4. Application Processing Fee is \$570.00.** Include a check or money order made payable to the California State Board of Pharmacy. This fee is nonrefundable.
- 5. Temporary License Explanation Letter:** Please include a written statement signed by the owner/partner/officer/member that clearly explains why it is in the best interest of the public that the Board should issue the facility a temporary license. Please include the pharmacy name, address, and license number where applicable. (Not needed for Change of Ownership or Change of Location applications).
- 6. Organizational Chart or Corporation Ownership Information form (17A-33)/Partnership or Individual (17A-34) and Parent Corporation or Limited Liability Company Ownership Information form (17A-33A):** Please include a business ownership organizational chart that clearly documents the applicant's business ownership structure. Include each level of ownership with corresponding percentage of ownership to the

top tier, percentages owned by all parties, and list the top five executive officers under the appropriate entity. If submitting a change of ownership application, include both the pre and post-closing organizational structures. This submission will satisfy Section B 1. of the Community Pharmacy Application (17A-4) or Nonresident Pharmacy Application (17A-57)

7. **License Verification:** If submitting a Nonresident Pharmacy application, please include a license verification from the pharmacy's home state. Please be sure the state seal is embossed on the license verification. This submission will satisfy Section A 9. of the Nonresident Pharmacy Application (17A-57).
8. **Lease or tentative lease agreement:** Please include an executed or tentative lease agreement. This submission will satisfy Section B 1. of the Community Pharmacy Application (17A-4) or Nonresident Pharmacy Application (17A-57)
  - a. *A change of physical location requires Board approval prior to the change occurring. All approved change of location applications results in a new license number being issued*
9. **For a Change of Ownership: Seller's Certification / Pending Purchase Agreement:** Please include the Seller's Certification and a copy of the pending purchase agreement. A copy of the final sale/closing documents will need to be submitted prior to issuance. This submission will satisfy Section B 1. of the Community Pharmacy Application (17A-4) or Nonresident Pharmacy Application (17A-57) *A change of ownership requires Board approval prior to the sale occurring. All approved change of ownership applications results in a new license number being issued.*

Note: Requirements listed on the Community Pharmacy Application (17A-4) or Nonresident Pharmacy Application (17A-57) must be met prior to full licensure.



**Signature Block**

By my signature below, I represent that: (1) I am a person authorized to act for and bind the applicant; (2) I have read the foregoing application, including any supplemental statements, know its contents, and declare that each and every statement made in this application is true; and (3) I understand that falsification of any information on this application may be grounds for denial or revocation of the license.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

_____ Signature of Proposed PIC	_____ Name (please print)	_____ Title	_____ Date
_____ Signature of Owner/Officer/Partner	_____ Name (please print)	_____ Title	_____ Date