

Wisconsin Department of Safety and Professional Services

Office Location: 4822 Madison Yards Way
 Madison, WI 53705
 Phone Number: (608) 266-2112

LicensE Portal: [License.wi.gov](https://license.wi.gov)
 Email: dsps@wisconsin.gov
 Website: <http://dsps.wi.gov>

PHARMACY EXAMINING BOARD

CHANGE OF NAME, OWNERSHIP, LOCATION OR ADDRESS FOR A PHARMACY, WHOLESALER DISTRIBUTOR OR MANUFACTURER

The following chart sets forth when a change of ownership occurs which requires a new license. To obtain a new application go to <https://license.wi.gov/>.

OWNER	TRANSACTION	CHANGE OF OWNERSHIP
Individual	Sells facility to another	YES
Individual	"Incorporates" him or herself and there are no other shareholders	NO [only a change in business form of owner]
Individual	Incorporates and adds shareholders other than self, or goes into partnership with other(s)	YES
Partnership	Sells facility to another	YES
Partnership	Members of partnership change <u>and</u> dissolves; e.g., individual(s) leaves	YES
Partnership	Members of partnership change, but partners vote not to dissolve unananimously or by partnership agreement	NO
Partnership	Partner Partnership decides to incorporate itself	NO [again, only a change business form--as long as no shareholders added who were not partners before]
Corporation	Change in shareholders (including sale of all stock)	NO [Corporation owns facility--not shareholders]
Corporation	Sells all assets (as opposed to stock)	YES [One asset being sold is facility; corporation no longer owns it after asset sale]
Corporation	Becomes a subsidiary or division of another corporation	NO [Corporation still owns facility, regardless of who owns corporation]
Corporation	Merges into/or consolidates with another corporation <u>and</u> loses corporate "identity"	YES

¹ Limited Liability Companies created under [Wis. Stat. ch. 183](#) are the same as corporations for change of ownership.

If you answered "yes" to any of the above items, **you can not renew your current license.** You must go the Department website at <https://dsps.wi.gov/Pages/Professions/Default.aspx> and choose the appropriate profession. Please view the information and forms.

If none of the above pertains to your situation, view the Frequently Asked Questions for further information.

Q: We would like to change our DBA name, how do we notify the Board?

A: Please submit a letter to the board indicating that this is a name change only and change of ownership has not occurred. Include your current and new name with your WI license number. To receive a new license certificate a \$10.00 fee is required.

Q: We would like to change our address, how do we notify the Board?

A: Submit a change of address application via LicensE, <https://license.wi.gov/>. If this is a postal change only and no physical move has taken place, submit a letter to the board indicating that this is a postal change only and no change of location has occurred. Include your current /new address with your WI license number. To receive a new license certificate a \$10.00 fee is required.

Q: We would like to close our facility, how do we notify the Board?

A: [Wholesale Distributors](#), [Drug or Device Manufacturers](#), and Pharmacy (**out-of-state only**) - submit a letter to the board requesting closure. Indicate your facility name license number and reason for closure.

For Pharmacy (**in-state**) you must file a Pharmacy Closing Affidavit, [Form 606](#).