

# Wisconsin Department of Safety and Professional Services

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## PHARMACY EXAMINING BOARD

### CHANGE OF NAME, OWNERSHIP, LOCATION OR ADDRESS FOR A PHARMACY, WHOLESALE 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 [dsps.wi.gov](http://dsps.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 unanimately 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

<sup>1</sup> Limited Liability Companies created under Ch. 183, Stats., 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 [www.dsps.wi.gov](http://www.dsps.wi.gov). Choose the appropriate profession, view the application/forms page and follow all application instructions.

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 a \$10.00 fee is required. Make checks payable to the Department of Safety and Professional Services.

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

A: How to file can be found on the Department website at: [www.dsps.wi.gov](http://www.dsps.wi.gov) Go to "Application/Forms" link posted under your profession. 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 a \$10.00 fee is required. Make checks payable to the Department of Safety and Professional Services.

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

A: For Wholesale Distributors, Drug or Device Manufacturers and Pharmacy (**out of state only**) Please 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 available on the Department website at [dsps.wi.gov](http://dsps.wi.gov) Go to "Application/Forms" link posted under your profession.