



**Prescription Drug Authorization Form**

Phone 844.342.5548

Fax 877.491.5755

[support@liveactionsafety.com](mailto:support@liveactionsafety.com)

[www.LiveActionSafety.com](http://www.LiveActionSafety.com)

Dear Customer,

If you wish to order narcotics, medications, or medical (legend) devices from LAS, your Medical Director or Pharmacist-In- Charge, must complete, sign, and return this Prescription Drug Authorization Form for our records.

When placing medication orders, a State License Number is required. When placing narcotic orders, a copy of your Medical Director's or Pharmacist-In-Charge's Federal DEA certificate is also required.

**Facility or Department Name:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

If there is a change in Medical Director or Pharmacist-In-Charge, this form will immediately become invalid and a new form including appropriate licenses, must be submitted for orders to be processed.

**>>>>>> This section is to be completed by your Medical Director or Pharmacist-In-Charge. <<<<<<<**

As Medical Director or Pharmacist-In-Charge, I am licensed to authorize and do give my permission for the shipment of items from the designated product categories listed below (please check one).

Unlimited Medications and Medical Devices - No Narcotics

Unlimited Narcotics, Medications, and Medical Devices

Limited Narcotics, Medications, or Medical Devices - Please list specific items: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

State License Number (a copy of the license must be attached to this form): \_\_\_\_\_

DEA Number(s) (a copy of the license must be attached to this form): \_\_\_\_\_

State Controlled License Number (if required) (a copy of the license must be attached to this form): \_\_\_\_\_

Physician Name (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

LICENSE FOR (LIVE ACTION SAFETY) ORDER# \_\_\_\_\_

**VISUAL EXAMPLE OF WHAT THE  
DEA CONTROLLED SUBSTANCE LICENSE LOOKS LIKE**

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID	<p align="center">CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537</p> <p>Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.</p> <p><b>THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.</b></p>
2,2N,3 3N,4,5	REVERSE DISTRIB	05-01-2017	
<p>U.S. DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION</p>			