

As stated in the *Pharmacy Act*, O. Reg, Part XV, S 56(1):

A Drug preparation premises (DPP) – Any place where a member engages in drug preparation activities, or where drug preparation activities take place that a member supervises, but does not include:

- A pharmacy in respect of which a valid certificate of accreditation has been issued under the *Drug and Pharmacies Regulation Act*.
- A premises in respect of which a valid establishment license has been issued under the Food and Drugs Act (Canada), or
- A hospital or a health or custodial institution approved or licensed under any general or special Act.

**Drug Preparation Activities** – Reconstituting, diluting or otherwise preparing a drug or combining, admixing or mixing together two or more substances, at least one of which is a drug, to create a final product for the purposes of the sale or provision to another person, other than pursuant to or in anticipation of a prescription.

Any registrant of the Ontario College of Pharmacists who engages in or supervises drug preparation activities at, or in connection with a drug preparation premises, is required under the *Pharmacy Act*, O. Reg, Part XV, S 60(1) to provide the College with the information found on this form:

Please complete this form including payment for an inspection and return it by email to <a href="mailto:pharmacyapplications@ocpinfo.com">pharmacyapplications@ocpinfo.com</a> or by fax to 416-847-8399.

As per the *Pharmacy Act*, O Reg, 256/24, S 60(2) an inspection will be performed within 60 days of notification



Co	DRPORATE INFORMATION (COMPANY TH	IAT OWNS THE	DPP)			
	CORPORATION NAME  Street Address					
A						
	City	Prov	ince	Postal Code	Postal Code	
	Phone Number	Fay N	Fax Number			
	T da Nullibel					
	Corporation Contact					
	The Corporate Contact is the person legally accountable for the corporation and will act as the primary contact person for all corporate matters.					
	CORPORATE CONTACT NAME				OCP NUMBER (IF APPLICABLE)	
	Email Address				PHONE NUMBER	
	Signature				Date	
	5/112					
ח	PP Information					
В	DPP NAME PROPOSED OPENING DATE					
	STREET ADDRESS	Сіту		PROVINCE ONTARIO	POSTAL CODE	
	EMAIL ADDRESS	Рнопе <b>N</b> umb			FAX NUMBER	
DPP PERSONNEL (ONLY LIST MEMBERS OF THE COLLEGE)						
С	Designated Member (serves as the contact person with the College)					
	Designated Member Name				OCP NUMBER	
	Others					
	Registrant Name				OCP NUMBER	
	Registrant Name				OCP NUMBER	
	Registrant Name				OCP NUMBER	
	Registrant Name				OCP NUMBER	

The College will contact the Designated Member to schedule an inspection.



### **Compounding Supervisors** If the DPP compounds any preparation, the compounding supervisor(s) and the method of compounding they are supervising must be identified. Compounding Supervisor of: OCP Supervisor's Name Sterile Sterile Non-Sterile Number (Level A, B, C) Non-Hazardous Hazardous D



### **DPP Inspection Payment Information** Refer to the Schedule of Fees on our website (line 23) – fee should be based on the year the inspection will occur: https://www.ocpinfo.com/wp-content/uploads/2019/12/schedule-of-fees.pdf **DPP NAME** ☐ I am enclosing a cheque made payable to the Ontario College of Pharmacists in the Amount ☐ I authorize the Ontario College of Pharmacists to charge the credit card below in the **AMOUNT** amount of: **CREDIT CARD AUTHORIZATION** ☐ Visa ■ MasterCard ■ American Express CREDIT CARD NUMBER EXPIRY DATE (MM/YY) CARDHOLDER'S NAME TELEPHONE Ε CARDHOLDER'S SIGNATURE DATE SIGNED If paying by credit card, you may submit your completed notification to the College by scanning and emailing the application form to the attention of Pharmacy Applications & Renewals at pharmacyapplications@ocpinfo.com or fax to 416-847-8399. If paying by cheque, please mail your complete notification to: Ontario College of Pharmacists Pharmacy Applications & Renewals 483 Huron Street Toronto, ON M5R 2R4.