Royal Pharmaceutical Society of Great Britain

2009 Application to transfer the ownership of registered pharmacy premises

Section 1 Documents to be submitted with application

1.1 **One set of A4 size plans of the pharmacy layout - please see section 9 for details**

1.2 **If the Corporate Body/Limited Company does not currently own registered pharmacy premises, please submit a completed nomination of Superintendent form and a copy of the Certificate of Incorporation with this application.**

1.3 **The Society now accepts transfer of ownership applications via email - please see section 14.6**

Section 2 Premises to be transferred

2.1 **Premises registration number**

Premises registration numbers can be found at www.rpsgb.org. Please select 'Search our Registers'. The transfer cannot proceed without the premises registration number.

2.2 **Date of transfer** / /

Please do not submit this form if the date of transfer is unknown or only proposed. **Applications can be submitted up to 28 days after the actual date of transfer.**

2.3 **RPSGB owner number** (**of new owner**)

If the Corporate Body/Limited Company does not currently own registered pharmacy premises, please leave this section blank.

2.4 Trading name after transfer

2.5 Premises Address

Postcode

Section 3 Pharmacist in charge/in personal control (after transfer)

Pharmacists who registered with the Society by virtue of a qualification in pharmacy awarded in a relevant European State, are not able to be the pharmacist in personal control of premises in Great Britain that have been a registered pharmacy for less than three years.

3.1 Registration Number

Forename

Surname

Section 4 Body Corporate/Limited Company making application

4.1 Name of Limited Company (**of new owner**)

SUPERINTENDENT

4.2 Registration Number

Forename

Surname

Section 5 Sole Traders or Partnership making application

5.1 Registration Number

Forename

Surname

5.2 Registration Number

Forename

Surname

Please return to: **Registration Division, 1 Lambeth High Street, London, SE1 7JN**
Any questions: phone: 0207 572 2322 fax: 0207 572 2510 email: registration@rpsgb.org

Section 6 NHS contractual arrangements (if applicable)

6.1 NHS contract (name of hospital, PCT, Health Board)

Section 7 Nature of business

7.1 Community/High Street ☐ Mail Order/Internet ☐ Medical Research/Specials ☐

Temporary ☐ Closed ☐ Hospital ☐

7.2 **If an internet pharmacy will be operated from the same premises, please enter the website address:**

w w w .

NB **The Society is now able to supply an Internet Pharmacy Logo to authenticate your on-line pharmacy. If you wish to make an application for this, please see separate form 'Application for an Internet Pharmacy Logo'.**

Section 8 Registered pharmacy services and activities

Why is the pharmacy being registered with the RPSGB? *(please tick)*

8.1	For the purpose of retail sale of non-GSL medicines	Yes ☐	No ☐
8.2	Dispensing of NHS prescriptions issued outside the premises	Yes ☐	No ☐
8.3	Dispensing of private prescriptions issued outside the premises	Yes ☐	No ☐
8.4	Assembly of medicines for the purpose of supply outside of the premises to another legal entity e.g. a hospital trust	Yes ☐	No ☐
8.5	To manufacture unlicensed medicines	Yes ☐	No ☐
8.6	To wholesale medicines outside of the premises to another legal entity e.g. a hospital trust	Yes ☐	No ☐
8.7	Other (please specify registerable activity)	Yes ☐	No ☐
8.8	Has the registered area been changed or relocated within the premises over the last five years?	Yes ☐	No ☐
	If so, approximate date of change/relocation	☐☐ / ☐☐☐☐	

Section 9 Plans of the pharmacy layout

One set of A4 size plans must be submitted with this application.

9.1 The Society requires a copy of the plans to ensure that it maintains an up-to-date register of pharmacy premises. The plans identify the registered area of the premises. It is important that the new owner supplies plans of the pharmacy layout to ensure that both they and the Society are in agreement as to in which areas registerable activities are permitted. **The transfer will not be processed unless appropriate plans are submitted with the application.**

9.2 The Society would prefer architects plans, however if these are not available hand-drawn plans on A4 paper are acceptable providing that they are drawn to scale and cover all the provisions of 9.3 – 9.7 below.

9.3 Identify the dimensions of the registered area (please indicate area in m^2 if irregular).

9.4 Identify the dimensions of the dispensary (please indicate in m^2 if irregular).

9.5 Clearly demarcate the registered area and dispensary.

9.6 Detail the postal address of the building in which the premises is situated.

9.7 Detail any other relevant information.

Section 10 Contact details (to be completed by new owners)

10.1 Title Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other (please state)

10.2 Forename

10.3 Surname

10.4 Phone Mobile

10.5 Email address

Section 11 Current owners

I have agreed to the ownership of the premises detailed above in Section 2 to transfer to the person(s) or body corporate making this application for the transfer of ownership.

11.1 Title Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other (please state)

11.2 Forename

11.3 Surname

11.4 Position held in limited company

Signature **Date** / /

Section 12 Statutory declaration (to be completed by new owners)

I declare the premises is arranged to enable the pharmacist in charge to exercise supervision over dispensing and sale of medicines at one and the same time. I understand and acknowledge the duty of any person running a retail pharmacy business and undertake to ensure compliance with all applicable legislation, regulations and professional obligations.

12.1 Title Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other (please state)

12.2 Forename

12.3 Surname

12.4 Position held in limited company

Signature **Date** / /

Section 13 Application checklist

13.1 **One set of A4 size plans has been submitted with the application** ☐ *Please tick*

13.2 **The current owner has signed the form** ☐ *Please tick*

Section 14 Additional Information

14.1 If the date of transfer changes after the application has been submitted please call the Registration Division on 0207 572 2322 or email registration@rpsgb.org quoting the premises registration number.

14.2 Applications can be submitted up to 28 days after the actual date of transfer.

14.3 A transfer of ownership is an administrative procedure and does not require the visit of an inspector. The application will be diarised until the actual date of transfer. On the actual date of transfer the Society will amend the register and confirm the transfer in writing. The Society does not authorise/approve/confirm a transfer until the actual date of transfer.

14.4 On the actual date of transfer the new ownership details can be viewed at www.rpsgb.org. Please select **'Search our Registers'** and enter the postcode of the premises.

14.5 **It is recommended that you keep a copy of this application for records purposes.** Applications lost in the post must be re-submitted in full.

14.6 The Society now accepts transfer applications via email. To submit this form and plans via email, please complete as normal, scan and email as a PDF to registration@rpsgb.org. Please submit the application and plan as one document.