



STATE OF TENNESSEE
DEPARTMENT OF HEALTH
DIVISION OF HEALTH LICENSURE AND REGULATION
OFFICE OF HEALTH RELATED BOARDS
665 MAINSTREAM DRIVE
NASHVILLE, TENNESSEE 37243

PHONE: (615) 253-1299 FAX: (615) 741-2722 EMAIL: pharmacy.health@tn.gov
<https://www.tn.gov/health/health-program-areas/health-professional-boards/pharmacy-board.html>

(To be completed for changes in Facility Manager or Designated Representative)

Select the appropriate to update license accordingly:

- FACILITY SITE MANAGER**
- CORPORATE DESIGNATED REPRESENTATIVE**

Tennessee License No.: _____

Facility Name

Facility Address

Suite No.

City

State

Zip Code

() _____

Phone No.

Former Facility Manager/ Designated Representative: _____

Departure Date: _____

New Facility Manager/ Designated Representative: _____

Effective Date: _____