

# Transfer of Ownership of Existing Pharmacy Premises

Notification form

## Section One – Previous Owner Details

Owners Name (s)	
Trading Name (on fascia sign)	
Print Name	
Signature of Previous Owner/ Superintendent/Director (please circle)	

## Section Two – New Owner Details – Please complete part a) or part b)

a) Sole Trader or Partnership taking over business

*Please add additional names on an attached page if required*

Surname	Forename (s)	Registration Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

b) Body Corporate taking over business

*Please attach a Notification of Superintendent form to this application if you have formed a Body Corporate not previously registered with the Society*

Name of Body Corporate	Address of Company Headquarters
<input type="text"/>	<input type="text"/>

## Section Three – Details of Premises

**New Trading Name of Premises on fascia sign (if applicable)**

**Address of Premises changing ownership**

## Section Four – Details of Transfer

a) Date of actual transfer

b) Name of Pharmacist in personal control of the premises:

c) Name and telephone number of person to contact regarding this application:

## Section Five – New Owner/Superintendent/Director *(please circle position)*

Signature

Print Name

Date

## Section Six – Payment

Please indicate the method of payment for the application fee of £113. Payments are taken on submission of an application.

Cheque         Debit card         Phone payment   

To make payment over the phone, please call 02890 326927 and select option 4 for the Finance Department. Please note that payments can only be processed from debit cards. This phone line is available during normal office hours.

Voluntary payments - If you wish to make a contribution to the Pharmacists' Advice and Support Service (PASS), please visit: [www.pfni.org.uk](http://www.pfni.org.uk)

## Guidance Notes

Please ensure that this form is completed in full to avoid delays in processing. Completed applications and supporting documentation can be posted to: Registration Department, Pharmaceutical Society NI, 73 University Street, Belfast, Co. Antrim, BT7 1HL. Alternatively, you may submit your application by email to [registration@psni.org.uk](mailto:registration@psni.org.uk)

An application cannot be processed until we have received both a completed form and the fee of £113.

## Legal Notes

Section 76 (3b) of the Medicines Act 1968 provides that the registration becomes void at the end of 28 days from the date on which a change of ownership occurs, unless the Society is notified.

When a change of ownership occurs on the death of a pharmacist owner, or, in a partnership, on the death of one of the partners, registration becomes void after three months from that date. See Section 76 (3a) of the Medicines Act 1968.