Drug Enforcement Administration Registration CSA Data Use Request

APPROVED OMB No. 1117-0059 Form Expires: 12/31/2024

Access to data from the Drug Enforcement Administration's Controlled Substances Act Registration Information Database is limited to those complying with Statutes and Rules administered by DEA, as well as other Federal, State, and local, laws and ordinances. Please complete this form to request access to the dataset from the DEA Controlled Substances Act Registration Information Database. The form must be completed in its entirety. Completed form and any supporting documentation must be emailed to DEA.CSARDA@dea.gov.

Type of request (please check one):	New Account []	Renewal of an Existing Account []	
Company Name:	Your Company Email Address:(This will be your username)		
		Last Name:	
Address 1 (PO Boxes not accepted):			
Address 2:			
City:	State:	Zip: Zip+4:	
Phone:	Extension:		
Agency or Company Type (please check): Federal/State Government/Law Enforcement [] Private Company []			
Is this request for a State Prescription Drug Monitoring Program (PDMP/PMP)? [] No [] Yes - State:			
Category you are applying for:			
[] Online Validation Tool	[] Full Dataset Down	load* [] Both*	
 Parent organizations of those entities registered under the Controlled Substance Act. Entities with Federal or State statutory requirements. Entities providing credentialing or verification services to the Pharmaceutical and Healthcare industry. 			
[] Limited Dataset Download (Does not contain DEA Numbers or Expiration Dates)*			
For those that do not fall into the above category but can demonstrate a Need-to-Know.			
* Please note that the Full and Limited Dataset Downloads require a self-designed database type system, a system designed by your organization, to efficiently use the downloaded file.			

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Justification: Describe in detail, your organization, and how the information will be used. Include Federal and/or State statutory requirements. If requesting to download the dataset, articulate the security measures you take to keep the data secure.

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DEA Registration Dataset Data-Use Agreement

In order to process your request for access to the DEA Controlled Substances Act Registration Information Database and the dataset contained within, you must agree to the following provisions.

The Drug Enforcement Administration is the owner of the DEA Controlled Substances Act Registration Information Database, and the dataset contained within. Access to the DEA Controlled Substances Act Registration Information Database, and the dataset contained within, is limited to those registered with, or by request to, the Drug Enforcement Administration in order to comply with Federal, State, and local, Statutes and Rules.

The unauthorized distribution, reverse engineering, re-engineering, profit from the sale, the incorporation in a software system or package for distribution, or the use for marketing and/or targeting, are strictly forbidden and not allowed uses of the dataset from the Controlled Substances Act Registration Information Database.

By your acknowledgement below, you agree to the following:

- Information contained within the dataset <u>will only be used for the purposes described in the justification section</u> within this application.
- Intentional misuse of the information contained within the dataset to include: use other than that described in the justification section, unauthorized distribution, reverse engineering, re-engineering, profit from the sale, the incorporation in a software system or package for distribution, or the use for marketing and/or targeting, are subject to civil and/or criminal prosecution.
- Agree to protect access to the information to prevent any unauthorized use thereof.
- Agree to notify DEA within 24 hours if any provided data is breached and/or disclosed to unauthorized persons.
- Agree to protect the information from any further dissemination and/or unauthorized use.
- Access to the DEA Controlled Substances Act Registration Information Database, and the dataset contained within, is issued on an annual basis. <u>Access must be applied for annually</u>.

(Signatures must be a <u>certifiable digital</u> or <u>pen signed</u> signature. Oth	ner types are not acceptable.)
Signature:	Date:
Printed name:	Title:

My signature confirms that I have read, understand the information, and agree to the terms outlined above.

BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1117-0059. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, gathering and maintaining the information needed, and completing and reviewing the collection of information. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this individual collection, or if you have comments or concerns regarding the status of your individual form, application or survey, please contact Heather E. Achbach, (571) 362.3261 directly.

WARNING: 21 USC 843(d), states that any person who knowingly or intentionally furnishes false or fraudulent information in the application is subject to a term of imprisonment of not more than 4 years, and a fine under Title 18 of not more than \$250,000, or both.