

NORTH CAROLINA BOARD OF PODIATRY EXAMINERS LICENSEE LIST REQUEST FORM

The NCBPE licensee list is to be used one time only and solely for the reason that you specify on your application. Any other use of the licensee list without written consent to the North Carolina Board of Podiatry Examiners is strictly prohibited. All requests must be pre-approved by the Podiatry Board members. Please allow four weeks for this process.

All requests must comply with State Administrative Rule 21 NCAC 52 .0210:

FEE FOR VALIDATION OF LICENSEE LISTS; COMPUTER SERVICES

(a) In order to validate a podiatrist's authority to receive drug samples pursuant to U.S. federal laws, the Board shall provide computerized lists of its licensees and their licensing status to companies engaged in the business of providing data information services to the pharmaceutical and healthcare industries for the purposes of validating the licensing status of health care professionals for a fee of three hundred dollars (\$300) per order, payable in advance. Orders for a list of licensees shall be placed at least four weeks in advance.

(b) Other Data Processing Services. The Board may provide data processing services related to the Board's powers and duties upon request from research and educational organizations. No fees for such services shall be assessed if the use of the data is for nonprofit educational or research purposes.

History Note: Authority G S 90-202 3, 150B-19(5)e,
Eff. April 1, 2005.

To obtain the NCBPE database list either as labels or electronic format, please complete this form and mail with payment to:

NCBPE Headquarters
1500 Sunday Drive, Suite 102
Raleigh, NC 27607-5151
(919) 861-5583; fax (919) 787-4916; info@ncbpe.org

Name: _____

Company _____

Mailing address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Reason(s) for obtaining the list _____

The following formats are available. Please check the box next to the format that you desire.

Complete List (Printed) Complete List (Excel) Mailing Labels (Avery #5160 labels)

All hardcopy orders will be shipped via the United States Postal Service or UPS. Excel will be emailed to the address listed above. (Delivery times vary during the year. Please allow up to 4 weeks. During license renewal period of June 1 to December 31, data may change frequently.)

The cost for each format is \$300.00

Method of payment: _____ check _____ money order

***Please make all checks or money orders payable to the "North Carolina Board of Podiatry Examiners"**

For office use only GL100-3090

Date received: _____ Check # _____ Amount \$ _____

Approved: Yes / No