FRESNO RESIDENT OFFICE OFFICE OF DIVERSION CONTROL

PERSONNEL WITH ACCESS TO CONTROLLED SUBSTANCES

NAME:	Date of Birth:	Place of Birth:
		(City/State)
Date of Naturalization/Visa:	Place of Naturalization/Entry:	Resident Alien #: A-
SEX: RACE: HEIGH	HT: WEIGHT: HAI	R COLOR: EYES:
DRIVER'S LICENSE NO.:	STATE: E	EXP.DATE:
HOME ADDRESS:(Address/City/S	Home T	Celephone:
WORK ADDRESS:(Address/City/S	Work 7	Celephone:
Cell Number: Date of	of Employment: Soci	al Security Number:
DEA REGISTRATION #:	DEA CHEMIC	CAL #:
STATE LICENSE (MD, DVM, PHA	ARM, RN, ETC.)	
JOB TITLE:		
Signature:	Da	nte:
	PRIVACY ACT INFORMATION	<u>N</u>
DEA-225 Application for Registre DEA-363 Application for Registre	ration (Type A) and renewals ration (Type B) and renewals ration (Narcotic Treatment) and renewaration under Domestic Chemical Divers	ils sion Control Act of 1993 and renewals
AUTHORITY: Section 301 of the Contrafficking Act of 1988	rolled Substances Act of 1970 (PL 91-5	13) and the Chemical Diversion and
PURPOSE: To obtain information requi	red to register/renew applicants pursua	nt to the Controlled Substances Act of

ROUTINE USES: The Controlled Substances Act Registration/Renewal of records produces special reports as required for statistical analytical purposes. Disclosure of information from this system is made to the following categories of users for the purposes stated:

- A. Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.
- B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.
- C. Person(s) registered under the Controlled Substances Act (PL 91-513) for the purpose of verifying the registration of customers and practitioners.

EFFECT: Failure to complete this form will preclude processing of the application.