

Instructions for completing DEA Form 254 CSOS Certificate Application Registrant List Addendum

The CSOS Certificate Application Registrant List Addendum is an addendum used for individuals who wish to apply for a CSOS Certificate for more than one DEA Registrant. Up to five (5) Registrant List Addendums may be submitted with any of the CSOS Certificate applications; the CSOS DEA Registrant Certificate Application, the CSOS Principal Coordinator / Alternate Coordinator Application or the CSOS POA Certificate Application.

Applicants who wish to apply for more than 50 CSOS Certificates with one CSOS Certificate Application should contact the CSOS RA for bulk enrollment procedures.

The information must be **TYPED** with the exception of signatures and the affirmations sections, which must be completed in blue or black ink.

Section 1 – Applicant Information

Field Name	Information Description
Applicant Last Name	Enter the last name of the applicant.
Applicant First Name	Enter the first name of the applicant.
Applicant MI	Enter the middle initial of the applicant.
Applicant Social Security Number	Enter the Social Security Number of the applicant. This information will be kept private and used for internal purposes as stated in privacy policy.
Addendum _ of _	Enter the page number of the addendum and the total number of addendums attached. Example 1 of 3, 2 of 3, 3 of 3.
DEA Reg.	Check this box if you are applying as a DEA Registrant for the DEA Registration numbers identified in Section 2. This box may not be checked if the POA box is checked.
Prin. Coord.	Check this box if you are applying as a Principal Coordinator for the DEA Registration numbers identified in Section 2. This box may not be checked if the Alt. Coord. Box is checked.
Alt. Coord.	Check this box if you are applying as a Alternate Coordinator for the DEA Registration numbers identified in Section 2. This box may not be checked if the Prin. Coord. box is checked.
POA	Check this box if you are applying to receive a Power of Attorney Certificate for the DEA Registration numbers identified in Section 2. This box may not be checked if the DEA Reg. box is checked.

Section 2 – DEA Registration List

Field Name	Information Description
DEA Registration Num	Enter the DEA Registration Number(s) for which the applicant will be responsible. The number(s) entered on the application MUST appear as it does on the registrant’s DEA Registration Certificate. Inconsistency between the application and the registration certificate will result in approval delays or denial.
DEA Registration Name	Enter the name of the DEA Registered location(s) as it appears on the DEA 223 Certificate. Inconsistency between the application and the registration certificate will result in approval delays or denial.

Section 3 – Applicant/Notary Signature

Field Name	Information Description
Applicant Signature	<p>The applicant must sign the application using blue or black ink. The party signing this application must be the same party identified in <i>Section 1 – Applicant Information</i> (First Name /Last Name/MI).</p> <p>DEA Registrant and CSOS Coordinator applicants are required to apply their signature IN THE PRESENCE of a certified notary public. It is the responsibility of the applicant to ensure that all information is completed.</p>
Notary Signature	<p>DEA Registrant & CSOS Coordinator applicants - A Certified Notary Public must sign the Registration List Addendum(s) attached to the Certificate application using blue or black ink.</p> <p>Power of Attorney applicants - The CSOS Coordinator must sign the Registration List Addendum(s) attached to the Certificate application using blue or black ink.</p>

Warning: When the applicant signs the application, he/she is stating that he/she has read, understands, and agrees to abide by the rules and regulations contained in the Controlled Substance Ordering System Subscriber Agreement and Certificate. He/She is certifying that the information, statements and representations provided by him/her on the application are true and accurate to the best of his/her knowledge. He/She understands that presenting false information is a criminal offense and is punishable by law. Section 843(a)(4)(A) of Title 21, United States Code, states that any person who knowingly or intentionally furnishes false or fraudulent information in the application is subject to imprisonment for not more than four years, a fine of not more than \$30,000.00 or both.

CSOS Certificate Application Registrant List Addendum

CSOS Certificate applicants shall complete this addendum to identify additional DEA Registrants for which a CSOS Certificate shall be issued. A CSOS Certificate application must accompany this addendum.

Section 1 – Applicant Information

Applicant Last Name	
Applicant First Name	
MI	Applicant SSN Number
Addendum	Of

Section 2 – DEA Registrant list

DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name
DEA Registration No.	DEA Registrant Name

Section 3 — Applicant/Notary Signature

Applicant Signature _____	Date _____
Notary/CSOS Coordinator Signature _____	Date _____