

# Create New DEA 486a

## Landing Page

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

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DEA Registration Number: RD0334425  
Business Activity: IMPORTER  
Company Name: DDN / OBERGFEL LLC  
Street Address: 4580 MENDENHALL ROAD  
City: MEMPHIS  
State: TN  
Postal Code: 381416700

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[Enter Disbursement Information](#) [Delete Transactions](#)

## 15-Day Advance Notice Instruction

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

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The Drug Enforcement Administration requires at least a 15-day advance notice for U.S. imports of Ephedrine, Pseudoephedrine and Phenylpropanolamine.

## Foreign Exporter Information

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

**Foreign Exporter Information**  
\*The following organization(s) are your providers. Please select one from the list.

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(1 of 1) 1 25

	Foreign Exporter	Street Address	City	Country
<input type="radio"/>	CADILA HEALTHCARE LIMITED	SURVEY NO. 417, 419 & 420 NATIONAL HIGHWAY NO. 8-A SARKHEJ-BAVLA ROAD, VILLAGE-MORAIYA	TALUKA-SANAND, AHMEDABAD, GUJARAT	INDIA
<input type="radio"/>	COVANCE LABORATORIES LTD	SARAH CAHIL OTLEY ROAD	HARROGATE	UNITED KINGDOM
<input type="radio"/>	DIRTY HARRY DRUG CO., LTD.	3388 PINE BRANCH BLVD.	BERN	SWITZERLAND
<input type="radio"/>	EMCURE PHARMACEUTICAL LTD	P-2, PHASE 2 ITB PARK MIDC HINJWADI	MAHARASTRA	INDIA

## Add New Exporter

### Add A Foreign Exporter

\* indicates required fields

Clear Back Next

Company Name*	<input type="text"/>
Address 1*	<input type="text"/>
Address 2	<input type="text"/>
City*	<input type="text"/>
Country*	Select One <input type="text"/>
Postal Code	<input type="text"/>

## Foreign Manufacturer

### APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

#### Foreign Exporter Information

\*The following organization(s) are your providers. Please select one from the list.

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(1 of 1) 1 25				
	Foreign Exporter	Street Address	City	Country
<input type="radio"/>	CADILA HEALTHCARE LIMITED	SURVEY NO. 417, 419 & 420 NATIONAL HIGHWAY NO. 8-A SARKHEJ-BAVLA ROAD, VILLAGE-MORAIYA	TALUKA-SANAND, AHMEDABAD, GUJARAT	INDIA
<input type="radio"/>	COVANCE LABORATORIES LTD	SARAH CAHIL OTLEY ROAD	HARROGATE	UNITED KINGDOM
<input type="radio"/>	DIRTY HARRY DRUG CO., LTD.	3388 PINE BRANCH BLVD.	BERN	SWITZERLAND
<input type="radio"/>	EMCURE PHARMACEUTICAL LTD	P-2, PHASE 2 ITB PARK MIDC HINJWADI	MAHARASTRA	INDIA

## Add New Manufacturer

### Add A Foreign Exporter

\* indicates required fields

Clear Back Next

Company Name*	<input type="text"/>
Address 1*	<input type="text"/>
Address 2	<input type="text"/>
City*	<input type="text"/>
Country*	Select One <input type="text"/>
Postal Code	<input type="text"/>

# Foreign Distributor

## APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

### Foreign Exporter Information

\*The following organization(s) are your providers. Please select one from the list.

<span>Back</span> <span>Next</span> <span>+ Add a New Exporter</span> <span>Cancel</span>				
(1 of 1) <span>1</span> <span>25</span>				
	Foreign Exporter	Street Address	City	Country
<input type="radio"/>	CADILA HEALTHCARE LIMITED	SURVEY NO. 417, 419 & 420 NATIONAL HIGHWAY NO. 8-A SARKHEJ-BAVLA ROAD, VILLAGE-MORAIYA	TALUKA-SANAND, AHMEDABAD, GUJARAT	INDIA
<input type="radio"/>	COVANCE LABORATORIES LTD	SARAH CAHIL OTLEY ROAD	HARROGATE	UNITED KINGDOM
<input type="radio"/>	DIRTY HARRY DRUG CO., LTD.	3388 PINE BRANCH BLVD.	BERN	SWITZERLAND
<input type="radio"/>	EMCURE PHARMACEUTICAL LTD	P-2, PHASE 2 ITB PARK MIDC HINJWADI	MAHARASTRA	INDIA

# Add New Distributor

## Add A Foreign Exporter

\* indicates required fields

Company Name*	<input type="text"/>
Address 1*	<input type="text"/>
Address 2	<input type="text"/>
City*	<input type="text"/>
Country*	<input type="text" value="Select One"/>
Postal Code	<input type="text"/>

Clear Back Next

## Add Listed Chemicals (blank)

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

Add Listed Chemicals  
Only one chemical can be entered.  
\* indicates required fields

Listed Chemical Information	Expected Quantity*	Container Type/Unit of Measure*
Listed Chemical* <input type="text" value="Select One"/>	<input type="text"/>	<input type="text" value="Select One"/>
Product Name* <input type="text"/>	<input type="text"/>	<input type="text" value="Select One"/> / <input type="text"/>
Salt Type <input type="text" value="Select One"/>	<input type="text"/>	<input type="text" value="Select One"/> / <input type="text"/>
Formulation <input checked="" type="radio"/> Raw Material <input type="radio"/> Preparation	<input type="text"/>	<input type="text" value="Select One"/> / <input type="text"/>
INCB	Mixture Factor*: <input type="text"/>	%

Listed Chemicals To Import						
Listed Chemical	Drug Code	Product Name	Net Wt(KG)	Base Wt(KG)	Product Package Details	
No records found.						

## Add Listed Chemicals (filled)

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

Add Listed Chemicals  
Only one chemical can be entered.  
\* indicates required fields

Listed Chemical Information	Expected Quantity*	Container Type/Unit of Measure*
Listed Chemical* <input type="text" value="Select One"/>	<input type="text"/>	<input type="text" value="Select One"/>
Product Name* <input type="text"/>	<input type="text"/>	<input type="text" value="Select One"/> / <input type="text"/>
Salt Type <input type="text" value="Select One"/>	<input type="text"/>	<input type="text" value="Select One"/> / <input type="text"/>
Formulation <input checked="" type="radio"/> Raw Material <input type="radio"/> Preparation	<input type="text"/>	<input type="text" value="Select One"/> / <input type="text"/>
INCB	Mixture Factor*: <input type="text"/>	%

Listed Chemicals To Import						
Listed Chemical	Drug Code	Product Name	Net Wt(KG)	Base Wt(KG)	Product Package Details	
<input type="button" value="Delete"/>	EPHEDRINE	8113.000	demoephedrine	30.000	24.576	1 DRUM(S); 2 BOX(ES); 3 PACKAGE(S); 5 KG

# Shipping Information (blank)

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

## Add Shipment Information

\* indicates required fields

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Port of Exportation	Port of Importation
Port Name*	Port Name*
Select One	Select One
Export Date*	Import Date*

### Transport Information

Mode of Transport\*

Select One

Name of Vessel/Carrier Name

### Documentation Information

Purchase/Invoice No

# Shipping Information (filled)

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

## Add Shipment Information

\* indicates required fields

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Port of Exportation	Port of Importation
Port Name*	Port Name*
ARLESHEIM^ SWITZERLAND	AGUADILLA^ PUERTO RICO
Export Date*	Import Date*
06/30/2017	07/31/2017

### Transport Information

Mode of Transport\*

TRUCK AND SEA

Name of Vessel/Carrier Name

DemoVehicle

### Documentation Information

Purchase/Invoice No

4654654

## Downstream Customer Information (blank)

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

Add Downstream Customer Information

\* indicates required fields

Listed Chemicals To Import				
Listed Chemical	Total Wt(KG)	DEA/Ref Number*	Distribution Wt(KG)*	Remainder Wt(KG)
EPHEDRINE	2	<input type="text"/>	<input type="text"/>	2

Downstream Customers				
Action	Listed Chemical	Company Name	DEA/Ref Number	Distribution Wt(KG)
No records found.				

## Downstream Customer Information (completed)

APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

Add Downstream Customer Information

\* indicates required fields

Listed Chemicals To Import				
Listed Chemical	Total Wt(KG)	DEA/Ref Number*	Distribution Wt(KG)*	Remainder Wt(KG)
EPHEDRINE	2	<input type="text"/>	<input type="text"/>	0.0

Downstream Customers				
Action	Listed Chemical	Company Name	DEA/Ref Number	Distribution Wt(KG)
<input type="button" value="trash"/>	EPHEDRINE	COAST LABORATORIES INC	PC0012156	<u>.5</u>
<input type="button" value="trash"/>	EPHEDRINE	KAISER FOUNDATION HOSPITALS	PK0132706	<u>.2</u>
<input type="button" value="trash"/>	EPHEDRINE	AMERISOURCEBERGEN DRUG CORP	RA0289050	<u>1.3</u>

## Data Verification

### APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

\*Please confirm all information before submitting this declaration. To make changes, click on the corresponding header label.

[Submit](#) [Cancel](#)

#### Importer

DDN / OBERGFEL LLC  
4580 MENDENHALL ROAD  
MEMPHIS, TN 381416700  
DEA Number: RD0334425

#### Foreign Exporter

ALEMBIC LIMITED  
ALEMBIC ROAD  
VADADARA 390 003, INDIA

#### Foreign Manufacturer

AARON RENTS FURNITURE COMPANY  
8787 SNOT NOSE BRAT RAOD  
ALBERTA, CANADA 09-14-16

#### Foreign Distributor

BILLY BOBS PHARMA  
123 PIES EATING CONTEST ROAD  
PISA, ITALY 09-20-2016

#### Listed Chemicals To Import

Listed Chemical	Drug Code	Product Name	Net Wt (KG)	Base Wt (KG)	Product Package Details
EPHEDRINE	8113.000	DemoEphedrine	2.000	2	1 BAG(S); 2 KG

#### Port of Exportation

Port Name: AHMEDABAD INDIA  
Date: 06/30/2017

#### Port of Importation

Port Name: ABERDEEN WASHINGTON  
Date: 07/31/2017

#### Transport Information

Mode of Transport: TRUCK AND SEA  
Name of Vessel/Carrier Name: DemoTruck

#### Documentation Information

Purchase/Invoice No: 465468

#### Downstream Customers Import

Listed Chemical	Company Name	DEA/Ref Number	Distribution Wt(KG)
EPHEDRINE	COAST LABORATORIES INC	PC0012156	.5
EPHEDRINE	KAISER FOUNDATION HOSPITALS	PK0132706	.2
EPHEDRINE	AMERISOURCEBERGEN DRUG CORP	RA0289050	1.3

#### Certification

I certify the listed chemicals listed herein are necessary and intended for medical, commercial, scientific, or other legitimate uses in the United States; and the information I'm providing to the Drug Enforcement Administration is, to the best of my knowledge and belief, complete and accurate.

#### Authorized Individual

SCOTT ROBERTS

#### Submit Date

06/13/2017

#### Name of Firm and Telephone Number

DDN / OBERGFEL LLC  
9017957117

## Confirmation

### APPLICATION TO IMPORT CHEMICALS (DEA FORM 486A)

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The DEA Form information you submitted has been sent to the Drug Enforcement Administration. The Drug Enforcement Administration will provide a Transaction ID after the information has been reviewed.

In the meantime, please take a note of this web tracking number I4QTQ2KSQ7.

[Print](#)