



MARYLAND DEPARTMENT OF HEALTH - PUBLIC HEALTH SERVICES

OFFICE OF CONTROLLED SUBSTANCES ADMINISTRATION (OCSA) formerly Division of Drug Control

4201 Patterson Avenue - 5th Fl., Baltimore, Maryland 21215

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(Revised: 6/6/17)

PRACTITIONER APPLICATION 2-YEAR CDS REGISTRATION/CERTIFICATION CDS #: M11600

SHEO P SHARMA MD
66 PAINTERS MILL RD
SUITE 106
OWINGS MILLS MD 21117

FOR OFFICE USE ONLY: APPLICATION AUDIT CONTROL SECTION

Processor Initials: Date: Note:

Do Not Write In This Section.

Expiration Date: 10/31/17

SEE INSTRUCTIONS ATTACHED. COMPLETE SECTIONS 1, 2 AND 3 BELOW. SIGN, DATE APPLICATION AND INCLUDE PAYMENT. APPLICATIONS TORN IN HALF, INCOMPLETE OR WITHOUT PAYMENTS WILL BE RETURNED...

\* KEEP A COPY OF APPLICATION.

SECTION 1: APPLICATION CLASSIFICATION, TYPE, PAYMENT AND FEE EXEMPT DETAILS

A. CLASSIFICATION-Check only one box: BDS, MD, DDS, DMD, DO, DPM, DVM, VMD, CRNP, CNM, EMS/Med.Dir., PA/New, PA/Renewal, Researcher Schedule I, II, III, IV, V

Table with 3 columns: B. FEE PAYMENT DETAILS, FOR OFFICE USE ONLY, C. FEE EXEMPT DETAILS FOR GOVERNMENT AGENCIES. Includes rows for Renewal, New, Address Change, Name Change, Duplicate CDS Permit, Discontinuation.

\*\*No fee for name/address change at time of renewal.

SECTION 2: APPLICANT DETAILS

SECTION 3: PROFESSIONAL LICENSE DETAILS

Form containing applicant details (Name, Business Name, Address, Mailing Address, Home Address, Telephone Nos., Email) and professional license details (License #, DEA #, Social Security, License Status).

Your signature attests to the fact that the information provided is accurate. It is the sole and continuing responsibility of the CDS Registrant to ensure the Office of Controlled Substances Administration (OCSA) has the correct and current address information on file for the issued CDS Registration.

