MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF PROFESSIONAL LICENSING

Record Summary for Drug Control Application 5307011301APP21

Record Type				
Drug Control Applica	ation	Created: 9/16/2021 11:04 am		
Record ID: 53070113	01APP21	Created by: PUBLICUSER771457, MiPLUS Online		
Payment Informa	tion			
Payment Amount	Method of Payment	Payment Date		
\$120.00	Credit Card	09/16/2021		
Good Moral Char	acter			
Good Moral Characte	er			
character, the departme you are seeking a licens whether any court judgm	nt will consider whether the substa e. Also, please know that you may nents against you would likely resu	ically prevent you from obtaining a license. In evaluating your good moral nce of your former offense is reasonably related to the profession to which request a preliminary determination from the Department concerning It in a denial of a license for failing to meet the good moral character ary determination can be found <u>here.</u>		
-	convicted of a felony?: een convicted of a felony	No		
Have you ever been convicted of a misdemeanor:		No		
•		inishable by imprisonment for a maximum term of two years or a ion, or use of alcohol or a controlled substance		
Offense:		-		
Year:		-		
Court:		-		
Case Number:				
Incarceration, Probati	on, or Parole Information:	-		
Multiple Offense Cheo	ckbox:	No		
 Check this box if 	you have additional offenses to rep	port		
Additional Offense Inf		-		
List each addition	nal offense, year, court, case numb	er; and incarceration, probation, or parole information		
Drug Control Loc	ation License			
Drug Control				
Address Line 1:		19305 West 7 Mile Rd		
Address Line 2:		-		
Address Line 3:				
City:		Detroit		
State:		Michigan		
ZIP Code:		48219		

Attachment

If you answered "yes" to either of the good moral character questions, you must upload court documents for each conviction.

If you answered "yes" to the disciplinary action question, you must upload documentation from each State Board or administrative agency indicating the resolution of the sanctions.

Name	Туре	Size	Latest Update
BPL_EXT_ACA_Receipt_REC_SGL_CRYS_20210916_110 418.pdf	Online Receipt	50 KB	09/16/2021

Signed Attestation

I certify that the statements in this application are true and complete, including any and all attached documents and information provided as part of this application. I understand that any omitted statement, misrepresentation, or fraud of any of the documents and information provided on or as part of this application may be cause for denial of my application, disciplinary action, and/or may be punishable by law.

I By checking this box, I agree to the above certification.

Date: 09/16/2021

This Record Summary shows MiPLUS data in record 5307011301APP21 as of 09/16/2021, 10:05 am