

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

Vision: To be the **Healthiest State** in the Nation

Application

Application Detail

License Type:	Medical Doctor
Profession Number:	1501 - Medical Doctor
License Number:	115077
Application:	Renew My Medical Doctor License
Application Date:	01/06/2021

Suitability Question(s)

Have you reviewed and confirmed your profile?	Yes
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Personal Detail

Title:	DR.
First Name:	DEBORAH
Middle/Second Name:	LYN
Last Name/Surname:	LEVICH

Addresses

Mailing Address

Address:	563 Blalock Lakes Drive #12
	#12
	Out of State
	NEWNAN, GA
	30263
	US

Phone Number:	(404) 384-5601
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E-mail Address:	dllevich@aol.com
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Place of Practice

Address:	4131 University Blvd S
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#2
DUVAL
JACKSONVILLE, FL
32216
US
(904)4488877

100 Northpoint Pkwy

PALM BEACH
WEST PALM BEACH, FL
33407
US

Phone Number:

Satellite Location
Address:

Availability for Disaster

Are you willing to provide health care services in special need shelters or to work with disaster medical teams during times of emergency or major disasters? **No**

Financial Responsibility/Exemption

Financial Responsibility **4. LIABILITY NOT LESS THAN \$250,000**

Fees

Active Renewal	\$360.00
Unlicensed Activity	\$5.00
Dispensing	\$100.00
Total Amount Due:	\$465.00

Attestation

By submitting the appropriate renewal fees to the Department, I certify compliance with all requirements for renewal. I am responsible for knowing these requirements as set forth in the laws and rules that govern my profession.

Attestation Answer: Yes