



Date

DEA Registration Office
75 Spring Street, SW
Room 800
Atlanta, GA 30303

(888) 869-9935 (**All Registrants**)
(404) 893-7572 (Fax)
(404) 893-7574 (Fax)

RE: CHANGE OF PROFESSIONAL PRACTICE ADDRESS

To Whom It May Concern:

This letter is to notify the North Carolina DEA registration office of my intention to move my professional practice; therefore I am changing my DEA registration to North Carolina. My DEA number is

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My current DEA registration address is:

My new work location will be:

The effective date of change will be -----.

Sincerely,

Provider Signature

Attachments:
NC medical license
Current DEA registration