

**APPLICATION FOR PRODUCT REGISTRATION – COSMETICS
 UNDER CHAPTER 499, FLORIDA STATUTES
 BUREAU OF PHARMACY SERVICES, DEPARTMENT OF BUREAU AND PROFESSIONAL REGULATION**

(1) *New Application* *Amended Application*

(2) ESTABLISHMENT PERMT NUMBER: _____ (3) PRODUCT REGISTRATION PERMIT NUMBER: _____

(4) _____
 NAME OF APPLICANT (business name in which registration will be issued)

 APPLICANT ADDRESS (physical location of establishment) ZIP (required)

 CITY STATE COUNTY

 AREA CODE AND PHONE NUMBER FAX NUMBER FEDERAL TAX IDENTIFICATION NUMBER (FEID #)

 MAILING ADDRESS (if different) ZIP (required)

 CITY STATE COUNTY

FOR THOSE ESTABLISHMENTS NOT PERMITTED UNDER CHAPTER 499, F.S., PROVIDE THE FOLLOWING:

TYPE OF OWNERSHIP: SOLE PROPRIETORSHIP PARTNERSHIP CORPORATION (State of incorporation) _____ OTHER: _____

OFFICIAL CORPORATE NAME IF DIFFERENT FROM APPLICANT NAME: _____

NAME OF OWNER or PRESIDENT (Last, First, MI) NORMAL OPERATING HOURS
 _____ : _____ M TO _____ : _____ M

ATTACH ALL PRODUCT LABELING THAT ACCOMPANIES PRODUCT (INCLUDING LABELS BEING AMENDED SINCE INITIAL SUBMISSION).

ADDITIONAL INFORMATION MAY BE REQUIRED, INCLUDING BUT NOT LIMITED TO PERCENTAGES OF SPECIFIC INGREDIENTS.

(5)	(6)	(7)	(8)
CFR COSMETIC PRODUCT CATEGORY	NAME OF COSMETIC PRODUCT (AS ON LABEL)	PROFESSIONAL USE ONLY	MANUFACTURER (Preparer/Producer) Name, City, and State

The products listed on this application for registration are legal in interstate commerce

 Signature of Authorized Representative of Applicant Title Date

FOR OFFICIAL DBPR USE ONLY

PERMIT NUMBER: _____ EXPIRATION DATE: _____ CHECK NUMBER/DATE: _____
 CHECK AMOUNT: _____

INSTRUCTIONS-COSMETICS

Applications must be typed or printed legibly in ink.

(1) **NEW APPLICATION; OR AMENDED APPLICATION:** Check the appropriate box. If the establishment does not have cosmetic products registered with the department, it is a new application. If the establishment currently has cosmetic products registered with the department and this is a new product to add to the existing registration, it is an amended application.

(2) **ESTABLISHMENT PERMIT NUMBER:** Record the current Department of Business and Professional Regulation issued permit number for the cosmetic manufacturing establishment. If the establishment is exempt from licensure because containers are not opened, write in "EXEMPT".

(3) **PRODUCT REGISTRATION PERMIT NUMBER:** Record the current DBPR issued permit number for cosmetics registered with the department. If this is a new application and you do not currently have products registered with the department, leave this blank.

(4) Complete the correct name, address, telephone number and FEID # section. If the establishment is EXEMPT from licensure, complete the section relating to the type of ownership; the official corporate name if applicable; the name of the owner, manager or president of the establishment; and the normal hours of operation for that establishment.

(5) **CFR COSMETIC PRODUCT CATEGORY:** Select the appropriate cosmetic product category to indicate the product's intended use:

(1) Baby Products

- (a) Baby Shampoos
- (b) Lotions, oils, powder, and creams
- (c) Other baby products
- (2) Bath Preparations
- (a) Bath oils, tables, and salts
- (b) Bubble baths
- (c) Bath capsules
- (d) Other bath preparations
- (3) Eye Makeup Preparations
- (a) Eyebrow pencil
- (b) Eyeliner
- (c) Eye shadow
- (d) Eye lotion
- (e) Eye makeup remover
- (f) Mascara
- (g) Other eye makeup preparations

(4) Fragrance Preparations

- (a) Colognes and toilet waters
- (b) Perfumes
- (c) Powders (dusting and talcum (excluding After-shave talc)
- (d) Sachets
- (e) Other fragrance preparations
- (5) Hair Preparations (noncoloring)
- (a) Hair conditions
- (b) Hair sprays (aerosol fixatives)
- (c) Hair straighteners
- (d) Permanent waves
- (e) Rinses (noncoloring)
- (f) Shampoos (noncoloring)
- (g) Tonics, dressings, and other hair grooming aids
- (h) Wave sets
- (i) Other hair preparations

(6) Hair coloring preparations

- (a) Hair dyes and colors (all types requiring caution statement and patch test)
- (b) Hair tints
- (c) Hair rinses (coloring)
- (d) Hair color sprays (aerosol)
- (e) Hair lighteners with color
- (f) Hair bleaches (a) After-shave lotions
- (g) Other hair coloring preparations
- (7) Makeup preparations (not eye)
- (a) Blushers (all types)
- (b) Face powders
- (c) Foundations
- (d) Leg and body paints
- (e) Lipstick
- (f) Makeup bases
- (g) Rouges
- (h) Makeup fixatives
- (i) Other makeup preparations

(8) Manicuring preparations

- (a) Basecoats and undercoats
- (b) Cuticle softeners
- (c) Nail creams and lotions
- (d) Nail extenders
- (e) Nail polish and enamel
- (f) Nail polish and enamel remover
- (g) Other manicuring preparations
- (9) Oral hygiene products
- (a) Dentifrices (aerosol, liquid, pastes and powders)
- (b) Mouthwashes and breath fresheners (liquids and sprays)
- (c) Other oral hygiene preparations

(10) Personal Cleanliness

- (a) Bath soaps and detergents
- (b) Deodorants (underarm)
- (c) Douches
- (d) Feminine hygiene deodorants
- (e) Other personal cleanliness products

(11) Shaving Preparations

- (b) Beard softeners
- (c) Men's talcum
- (d) Preshave lotions (all types)
- (e) Shaving cream (aerosol, brushless, and lather)
- (f) Shaving Soap (cakes, stick, etc)
- (g) Other shaving preparations

(12) Skin care preparations (creams, lotions, powders and sprays)

- (a) Cleansing (cold creams, cleansing lotions, liquids, and pads)
- (b) Depilatories
- (c) Face and neck (excluding shaving preparations)
- (d) Body and hand (excluding shaving preparations)
- (e) Foot powders and sprays
- (f) Moisturizing
- (g) Night
- (h) Paste masks (mud packs)
- (i) Skin fresheners
- (j) Other skin care preparations
- (13) Suntan and sunscreen preparations
- (a) Suntan gels, creams, and liquids
- (b) Indoor tanning preparations
- (c) Other suntan preparations

(6) **NAME OF COSMETIC PRODUCT:** Record the name of the cosmetic as it appears on the label. The adding of color, flavor, or scents does not make a separate and distinct cosmetic product for each variation and should be listed only once on this application. The additional colors, flavors and scents must be listed on an Identical Product Form.

(7) **PROFESSIONAL USE ONLY:** Place an (X) by each product being registered that will be manufactured for professional use only.

(8) **MANUFACTURER (Preparer/Producer):** If you are a labeler or repacker who does not add substances to the product, or you only add color, flavor, or fragrances to a product made by another, provide the name, city and state of the manufacturer (preparer/producer). An authorized representative of applicant must sign and date the product registration form. Include the title of the person signing the registration application. The authorized representative should be an owner, officer or employee with authority to bind the establishment to the representations made on the registration application.

YOU MUST ATTACH PRODUCT LABELING FOR EACH COSMETIC PRODUCT REGISTERED INITIALLY OR WHENEVER A CHANGE HAS BEEN MADE TO THE LABEL.

The biennial registration fee is \$30 per product. If this is an amended application and the existing registration has 12 months or less until it expires, the registration fee is \$15 per product.

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PERMIT NUMBER: _____

EXPIRATION DATE: _____

CHECK NUMBER/DATE: _____

CHECK AMOUNT: _____

Enclose a check, cashier's check or money order made payable to: The Department of Business and Professional Regulation. Send the COMPLETED application, attached labels, ingredients and percentage code if applicable, and check to the Drugs, Device and Cosmetics, 1940 North Monroe Street, Tallahassee, Florida 32399-0783.

Please refer to Rule 64F-12.016, Florida Administrative Code if additional information regarding the product registration process is desired. Also, you may find Chapter 499, Florida Statutes, and the rest of Rule 64F-12, Florida Administrative Code helpful for information related to the Florida Drug and Cosmetic Act. Visit our web site at www.myfloridalicense.com.

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