



Florida Department of Health (Department)

APPLICATION FOR EXEMPTION FROM PAIN MANAGEMENT CLINIC REGISTRATION

Initial Application Renewal: Certificate of Exemption Number

1. Corporate or Legal Name of Pain Management Clinic:

2. Fictitious or Doing Business As Name:

3. Federal Tax Identification Number (FEIN#):

4. Pain Management Clinic Address: (Street) (Suite #)

(City) (State) (ZIP Code)

5. Mailing Address: (Street) (Suite #)

(City) (State) (ZIP Code)

6. Pain Management Clinic Telephone Number: ( )

7. Pain Management Clinic Fax Number: ( )

8. Pain Management Clinic Email Address:

(Under Florida law email addresses are public records. If you do not want your email address released in response to a public records request do not provide an email address or send electronic mail to this office and contact the office by telephone or in writing.)

9. Exemption Claimed: (Check One)

- Clinic is licensed as a facility under Chapter 395, Florida Statutes.
The majority of physicians providing services in the clinic provide primarily surgical services.
Clinic is owned by a publicly held corporation whose shares are traded on a national exchange or on the over-the-counter market and whose total assets at the end of the corporation's most recent fiscal quarter exceeded \$50 million.
Clinic is affiliated with an accredited medical school at which training is provided for medical students, residents or fellows.
Clinic does not prescribe controlled substances for the treatment of pain.
Clinic is owned by a corporate entity exempt from federal taxation under 26 U.S.C. s. 501(c)(3).
Clinic is wholly owned and operated by one or more board-eligible or board-certified anesthesiologists, physiatrists, rheumatologists, or neurologists.
Clinic is wholly owned and operated by one or more board-eligible or board-certified medical specialists who have also completed fellowships in pain medicine approved by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association, or who are also board-certified in pain medicine by a board approved by the American Board of Medical Specialties or the American Osteopathic Association and perform interventional pain procedures of the type routinely billed using surgical codes.

Printed Name of Clinic Owner:

Signature of Clinic Owner:

Date: