

**ACKNOWLEDGMENT OF LEGAL REQUIREMENTS
REGARDING THE SALE OF CONTROLLED CHEMICAL SUBSTANCES**

COMPANY NAME _____
ADDRESS _____

(INITIAL AFTER EACH PARAGRAPH)

I have read and been given a copy of Health & Safety Code Section 11100 through 11107.1

I understand the requirements set forth in the above-named sections as they pertain to the sales and receipt of precursors, chemical reagents and solvents, and laboratory apparatus and glassware. _____

I understand that anyone who furnishes any substance listed in Section 11100 or receives these substances from a source outside the state is required to have a Controlled Chemical Substance Permit and notify the Department of Justice 21 days prior to the transaction. I understand that violation of these requirements is punishable as a misdemeanor or felony. _____

I have been informed that the substances listed in Sections 11100, 11107 and 11107.1 are frequently used in the manufacture of illegal drugs. _____

I have been informed that the purchase of certain chemicals in combination is regarded by the Department of Justice as intended for use in manufacturing illegal drugs. _____

I have read and been given a copy of Health & Safety Code Section 11366.7 which states in part that any retailer or wholesalers who sells any chemical, drug, laboratory apparatus, or device with knowledge or the intent that it will be used to unlawfully manufacture, compound, convert, process or prepare a controlled substance for unlawful sale or distribution shall be punished by imprisonment in the county jail for not more than one year, or in the state prison. _____

I understand that failure to comply with any of the provisions pertaining to the sale of chemicals and laboratory apparatus may result in the immediate revocation of a Controlled Chemical Substance Permit.

I understand that as a condition of registration, the Office of the Attorney General or any duty authorized federal or state official shall have the authority to make any examination of the books, records and/or inventory of any applicant or permit holder and visit and inspect premises of the aforementioned during normal business hours as deemed necessary to carry out Chapter 3 of Division 10 of Health & Safety Code. _____

PRINT OR TYPE NAME _____ TITLE _____

SIGNATURE _____ DATE _____

WITNESS _____ TITLE _____

**CONTROLLED CHEMICAL SUBSTANCE WAIVER
HEALTH & SAFETY CODE SECTION 11100-11106**

I certify that this business or any of its subsidiaries or agents manufacture, wholesale, retail or otherwise furnish one or more of the controlled substances listed in California Health & Safety Code Section 11100 to a person, entity or business entity in this state or any other state and may receive these substances from a source outside of the state.

(Initial)

////////////////////////////////////
**CHEMICAL AND LABORATORY GLASSWARE & APPARATUS WAIVER
HEALTH & SAFETY CODE SECTION 11107**

I certify that this business or any of its subsidiaries or agents manufacture, wholesale, retail, or otherwise furnish chemical reagents, chemical solvents, laboratory glassware or apparatus as listed in California Health & Safety Code Section 11107.

(Initial)

////////////////////////////////////
**SPECIFIED CHEMICALS WAIVER
HEALTH & SAFETY CODE 11107.1**

I certify that this business or any of its subsidiaries or agents manufacture, wholesale, retail or otherwise furnish one or more of the chemical substance specified in the California Health & Safety Code Section 11107.1.

(Initial)

////////////////////////////////////

COMPANY NAME _____	
ADDRESS _____	
TELEPHONE _____	TITLE _____
PRINT OR TYPE NAME _____	DATE _____
SIGNATURE _____	DATE _____
WITNESS _____	TITLE _____