

LABELER IDENTIFICATION APPLICATION

Required for the FDA's Unique Device Identification (UDI) Rule

Included here:

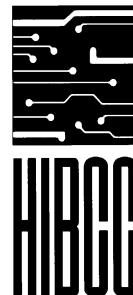
- **Instructions**
- **Form A *LIC Assignment***
- **Form B *Labeler Fee***
- **Form C *Certification Report***

Any organization interested in adopting and using the HIBCC uniform bar coding system must apply for assignment of a Labeler Identification Code (LIC).

To apply for assignment of an LIC follow the steps outlined in the instructions which follow.

**Health Industry Business
Communications Council**

2525 E. Arizona Biltmore Circle
Suite 127
Phoenix, AZ 85016
Tel: 602.381.1091
Email: info@hibcc.org
Web site: www.hibcc.org



■ INSTRUCTIONS: FOR COMPLETING FORM A

(To be completed by all applicants)

Purpose of Application

LABELER IDENTIFICATION CODE (LIC) ASSIGNMENT

1. Contact Information

Enter your organization's name, address and the name, title and telephone number of your organization's official representative to HIBCC. The official representative will represent your organization in all affairs dealing with your code assignment and HIBCC.

Also enter the name, address, title and telephone number of your organization's chief executive officer (CEO). If your organization is a subsidiary or division of a parent organization, you should enter your subsidiary's or division's CEO, not the parent's.

2. Transfer of Assignments

LIC assignments are non-transferable.

■ INSTRUCTIONS: FOR COMPLETING FORM B

(To be completed by all applicants)

Labeler Fee

You must certify your most recent calendar or fiscal year sales level by completing the CERTIFICATION REPORT.

■ INSTRUCTIONS: FOR COMPLETING FORM C

(To be completed by all applicants)

Specify your annual sales and the calendar or fiscal year of those sales. Next, check the appropriate sales category which determines your fee for the LIC assigned. Sign and date and return with your application.

LIC: Enter the fee for the LIC in Section A, Form B (determined in the CERTIFICATION REPORT). Sign, date and send forms A, B, and C to: **HIBCC, 2525 E. Arizona Biltmore Circle, Suite 127, Phoenix, AZ 85016**. Make all checks payable to HIBCC. If paying by credit card send via email to info@HIBCC.org.

■ FORM A: LIC ASSIGNMENT

PURPOSE OF APPLICATION: LABELER IDENTIFICATION CODE (LIC) ASSIGNMENT

PRIMARY ORGANIZATION:

Primary Organization Name

Division / Subsidiary

Name of Official Representative

Title

Phone

Number and Street

PO Box

City/State/Zip Code/Country

E-Mail Address

Name of Chief Executive Officer

Title

Phone

Address, if different from above

CEO's E-Mail Address, if different from above

TYPE OF ORGANIZATION	MEDICAL	DENTAL	ANIMAL HEALTH
<input type="checkbox"/> MANUFACTURER OF GOODS OR SERVICES	_____	_____	_____
<i>(check applicable box for primary market)</i> <input type="checkbox"/> DISTRIBUTOR/WHOLESALER	_____	_____	_____

FOR OFFICE USE ONLY:

Date Received Application

Fee

Date Received Payment

LIC #

Date Assigned

Initials

■ FORM C: CERTIFICATION REPORT

Please certify your most recent fiscal year sales level. Applicants are required to submit one of the following from the last fiscal/calendar year: Dun & Bradstreet Report, Profit & Loss Statement, or page 1 of your company's Corporate Tax Return (and any related documents). This information will be kept confidential and will only be used to determine the LIC fee.

Gross global sales of all products/devices labeled with your organization's name or brand.

THIS INFORMATION WILL BE TREATED ON A CONFIDENTIAL BASIS

Specify annual sales \$_____ for the most recent calendar or fiscal year: _____.

Check the appropriate box and enter the ONE-TIME FEE amount in Section A - LABELER FEE on FORM B.

<u>SALES</u>	<u>ONE-TIME FEE</u>	<u>SALES</u>	<u>ONE-TIME FEE</u>
<input type="checkbox"/> up to \$2 million	\$1,000	<input type="checkbox"/> up to \$100 million	\$7,500
<input type="checkbox"/> up to \$5 million	\$1,500	<input type="checkbox"/> up to \$150 million	\$9,000
<input type="checkbox"/> up to \$10 million	\$2,500	<input type="checkbox"/> up to \$500 million	\$12,000
<input type="checkbox"/> up to \$30 million	\$4,000	<input type="checkbox"/> above \$500 million	\$20,000
<input type="checkbox"/> up to \$60 million	\$5,000		

Legal Notice:

By signing this application you are certifying that all financial information provided is correct and in accordance with the guidelines stated above. If HIBCC determines that the financial information provided is incorrect, you will be invoiced for the balance due prior to issuing your LIC. HIBCC reserves the right to deactivate any LIC that was obtained under false financial pretenses and notify all invested parties. All fees are non-refundable.

Signature of Official Representative

Title

Date