

Veterinary Drug Control Authority
Department of Animal Production and Health

Date: ..

Import Registration - New (Check List)

S.N.		
Name of the Product		
Generic Name		
Strength		
Pharmacology Category		
Manufacturer		
Pack Size-Presentation		
Local Agent		
S.N.	Description	
Application Completed		
Manufacture License		
A Issued by		
B Validity		
C SL Embassy		
Free Sales certificate		
A Issued by		
B Validity		
Export Certificate		
A - Issued by		
B - Validity		
C - SL Embassy		
GMP Certificate		
A - Issued by		
B - Validity		
C - SL Embassy		
Other Countries Registration		
Name of the Country		
Certificate of Analysis	Own Independent	
Stability Test Results		
Toxicity Trial Report		
Records of Clinical Evaluation / Efficacy Trials		
Withdrawal Period		
Species		
Label / Empty Carton		
Samples		
Soft Copy		
Payment		
Amount & Cheque or Receipt No		

Received a copy

Development Assistant
(Checked by)Registrar VDCA
(Endorsed by)

Applicant's Signature

**Veterinary Drug Control Authority
Department of Animal Production and Health
Import Registration –Renewal (Check list)**

Annexure (2)

Date

Serial No.		
Name of the Product		
Generic Name		
Strength		
Pack Size (Presentation)		
First registration certificate	VDCA Code Date	VDCA Code Date
Previous registration certificate	VDCA Code Date	VDCA Code Date
Local Agent		
Manufacturer		
Serial No.	Designation	
01. Application Completed		
02. Free Sale Certificate		
Issued by		
Validity		
03. Manufacturing Certificate		
Issued by		
Validity		
04. GMP Certificate		
05. Dosage Form		
06. Animal Species Indicated		
07. New Records of Clinical Evaluation		
08. Withdrawal Period		
09. Label/Empty Cartoon		
10. Quantity of the Product imported in last three years		
11. District wise distribution details of the Product in last three years		
12. Any changes from the previous registration		
13. Payment		

Registrar/VDCA

Applicant's Signature

Veterinary Regulatory Affairs Division
 Department Of Animal Production and Health

Date:

~~Manufacture License~~ / *Re-packing*
 New (Check List)

S.N.			
Name of the Product			
Generic Name			
Strength			
Dosage Form Pack Size- Presentation			
Pharmacology Category			
Raw Material Manufacture			
Raw Material Supplier :			
Local Manufacture			
S.N.		Description	
01	Application Completed		
02	Manufacturing Process		
02 A	The Description of the Place		
02 B	Details of Equipment		
02 C	Details of Trained Personal Available		
02 D	Detailed Description of Quality Control		
03	Soft Copy		
04	Payment; Amount & Cheque or Receipt No		

Received a Copy

Development Officer
 Signature
 (Checked by)

Registrar/ vDCA
 (Endorsed by)

Applicant's

Veterinary Regulatory Affairs Division
 Department of Animal Production and Health

Date:

~~Manufacturing~~/Re-packing License – Renewal (Check List)

S.N.		
01. Name of the Applicant / Organization		
02. Address of the Applicant/ organization		
03. Name of veterinary drug / biological product for which renewal is requires license No:		
Date of Issue		
04. Period for which renewal is requested		
From * until		
05. Any improvements deviations from the already communicated information as per previous application (to be supported with detailed documents, i.e. technical/scientific)		
06. Details of any instructions given by DAP & H during the Last year regarding the manufacture/ re-packing of the said item and action taken		
07. Application Completed		
08. Payment, Amount & Cheque or Receipt No		

Development Assistant
 (Checked by)

Registrar VDCA
 (Endorsed by)

Received a copy
 Applicant's Signature

Veterinary Regulatory Affairs Division
 Department Of Animal Production and Health

Date:

Manufacture License – New (Check List)

S.N.		
Name of the Product		
Generic Name		
Strength		
Dosage Form Pack Size- Presentation		
Pharmacology Category		
Raw Material Manufacture		
Raw Material Supplier		
Local Manufacture		
S.N.		Description
01	Application Completed	
02	Manufacturing Process	
02 A	The Description of the Place	
02 B	Details of Equipment	
02 C	Details of Trained Personal Available	
02 D	Detailed Description of Quality Control	
03	Soft Copy	
04	Payment; Amount & Cheque or Receipt No	

Received a Copy

Development Officer
 Signature
 (Checked by)

Registrar/ VDCA
 (Endorsed by)

Applicant's

Veterinary Regulatory Affairs Division
 Department of Animal Production and Health

Date:

Manufacturing/~~Re-packing~~ License – Renewal (Check List)

S.N.		
01. Name of the Applicant / Organization		
02. Address of the Applicant / organization		
03. Name of veterinary drug / biological product for which renewal is requires license No:		
Date of Issue		
04. Period for which renewal is requested		
From until *		
05. Any improvements deviations from the already communicated information as per previous application (to be supported with detailed documents, i.e. technical/scientific)		
06. Details of any instructions given by DAP & H during the Last year regarding the manufacture/ re-packing of the said item and action taken		
07. Application Completed		
08. Payment, Amount & Cheque or Receipt No		

Development Assistant
 (Checked by)

Registrar VDCA
 (Endorsed by)

Received a copy

Applicant's Signature

Veterinary Regulatory Affairs Division
 Department of Animal Production and Health

Date:

Local Manufacture & Free Sales Registration – New (Check List)

S.N.			
Name of the Product			
Generic Name			
Strength			
Pack Size-Presentation			
Manufacturer			
Marketed by			
S.N.		Description	
Application Completed			
Manufacture License			
A Issued by			
B Validity			
Export Certificate			
A - Issued by			
B - Validity			
GMF Certificate			
A - Issued by			
B - Validity			
Other Countries Registration			
Name of the Country			
Certificate of Analysis		Own	
		Independent	
Stability Test Results			
Toxicity Trial Report			
Records of Clinical Evaluation / Efficacy trial			
Withdrawal Period			
Species			
Label / empty Carton			
Samples			
Soft Copy			
Payment			
Amount & Cheque or Receipt No			

Development Assistant
(Checked by)

Registrar VDCA
(Endorsed by)

Received a copy

Applicant's Signature

**Veterinary Regulatory Affairs Division
Department of Animal Production and Health**

Allice (8)

Date:

Local Manufacture Free Sale – Renewal (Check List)

S.N		
Name of the Product		
Generic Name		
Strength		
Pack sizes - Presentation		
Copy of the previous registration certificate		
Manufacturer		
Marketed By		
S.N.	Designation	
01	Application completed	
02	Manufacturing Certificate	
02 A	- Issued by	
02 B	- Validity	
03	GMP Certificate	
04	Dosage Form	
05	Animal Species Intended	
06	New Records of Clinical Evaluation	
07	Withdrawal Period	
08	Label/Empty Cartoon	
09	Information of Sales During Last 3 Years	
10	Payment Amount & Cheque or Receipt No	

Received a copy

.....

.....

.....

Development Assistant
Signature

Registrar VDCA

Applicant's

(Checked by)

(Endorsed by)

Veterinary Regulatory Affairs Division
Department Of Animal Production and Health

Date:

Manufacture License - New (Check-List) For Export Purpose Only

S.N.		
Name of the Product		
Generic Name		
Strength		
Dosage Form Pack Size- Presentation		
Pharmacology Category		
Raw Material Manufacture		
Raw Material Supplier		
Local Manufacture		
S.N.		Description
01	Application Completed	
02	Manufacturing Process	
02 A	The Description of the Place	
02 B	Details of Equipment	
02 C	Details of Trained Personnel Available	
02 D	Detailed Description of Quality Control	
03	Soft Copy	
04	Payment Amount & Cheque or Receipt No	

Received a Copy

Development Officer
Signature
(Checked by)

Registrar/ VDCA
(Endorsed by)

Applicant's

Veterinary Regulatory Affairs Division
Department of Animal Production and Health

Date:

Manufacture License (Export) – Renewal (Check List)

For Export purpose only

S.N.		
01. Name of the Applicant / Organization		
02. Address of the Applicant/ organization		
03. Name of veterinary drug / biological product for which renewal is requires license No; Date of Issue		
04. Period for which renewal is requested From until		
05. Any improvements/deviations from the already communicated information as per previous application (to be supported with detailed documents, i.e. technical/scientific)		
06. Details of any instructions given by DAP & H during the Last year regarding the manufacture/ re-packing of the said item and action taken		
07. Application Completed		
08. Payment; Amount & Cheque or Receipt No		

Development Assistant
(Checked by)

Registrar VDCA
(Endorsed by)

Received a copy

Applicant's Signature