

**Veterinary Drug Control Authority  
Department of Animal Production and Health**

**Date:**

**Export License – Renewal (Check list)**

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

Received a copy

Development Assistant

Registrar VDCA

Applicant's Signature

(Checked by)

(Endorsed by)