

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

Date:

Manufacture License – Renewal (Check list)

S.N.		
01. Name of the Applicant's Organization		
02. Address of the Applicant's Organization		
03. Name of the 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 document, 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.	

Received a copy

Development Assistant

Registrar VDCA

Applicant's Signature

(Checked by)

(Endorsed by)