

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

**Date:**

**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 Personnel Available	
02 D	Detailed Description of Quality Control	
03	Soft Copy	
04	Payment; Amount & Cheque or Receipt No.	

Received a Copy

Development Officer  
(Checked by)

Registrar / VDCA  
(Endorsed by)

Applicant's Signature