

**Form:** IXa-IA  
**Regulation Section:** 70 & 72

**APPLICATION FOR AUTHORIZATION TO IMPORT MEDICINAL  
PRODUCT(S) FOR SALE/DISTRIBUTION**

I, ..... hereby apply for a authorization to import for following medicinal products in Bhutan for sale and distribution.

Sl. No.	Product Name	Pack	Composition (With Strength)	Registration No.

Address of the premises/Store: .....

.....

Is the product registered by the applicant? YES  NO  (Please tick the appropriate boxes).

(Please attach the following Documents)

- a. Copy of Proforma invoice or evidence for the source of distribution
- b. No Objection letter from the Market Authorization holder in case the importer is different from the Market Authorization holder.
- c. Letter of No Objection for importing if the importer is different from the Market Authorization Holder

**Declaration (please tick the boxes):**

I hereby declare that the documents submitted above/all information provided is true to my knowledge and will be liable for any consequences if any information provided is proved to be false or misleading.

If my application is granted, I shall abide by the Medicines Act and Medicines Regulations and any other standards set by the Authority.

Signature of applicant: .....  
Name: .....  
Address: .....

Date: .....