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**PHARMACY AND POISONS BOARD**

**Application for approval of promotion materials**

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| **Pharmacy and****Poisons Board** | **Application form**  |  |
| **Rev No** |
| 1. **Company Details**
 |
| Name of company |  |
| Registration No |  |
| Physical address |  |
| Building |  |
| Street/Road |  |
|  |  |
| 1. **Applicant Information**
 |
| Name of applicant |  |
| Registration number |  |
| Cadre |  |
| Telephone |  |
| 1. **Responsible Person Information**
 |
| Name of the officer |  |
| Registration No |  |
| Cadre |  |
| Telephone |  |
| 1. **Product Particulars**
 |
| **legal category** | **Products/Device** | **Reg No** | **Type of Media** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 1. **Application check list**
 |
| A copy of the proposed advert |  |
| Proof of payment |  |
| Copy of reference materials  |  |
| Copy of previous approval |  |
| 1. **Applicant Declaration**
 |
| …………………………………………………declare that the information contained within this application is true and correct. | **Date …………………****Sign…………………….****Stamp………………….** |
|  |  |
| 1. **FOR OFFICIAL USE ONLY**
 |
| Product | Approval granted | Rejection granted |
|  |  |  |
|  |  |  |
|  |  |  |
| **Reason for Rejection** |
|  |
| **Name of officer** | **Date:****Sign:** |