



Application for Change of Premises – Allopathic Drugs Sales License from Food Safety and Drug Administration Department

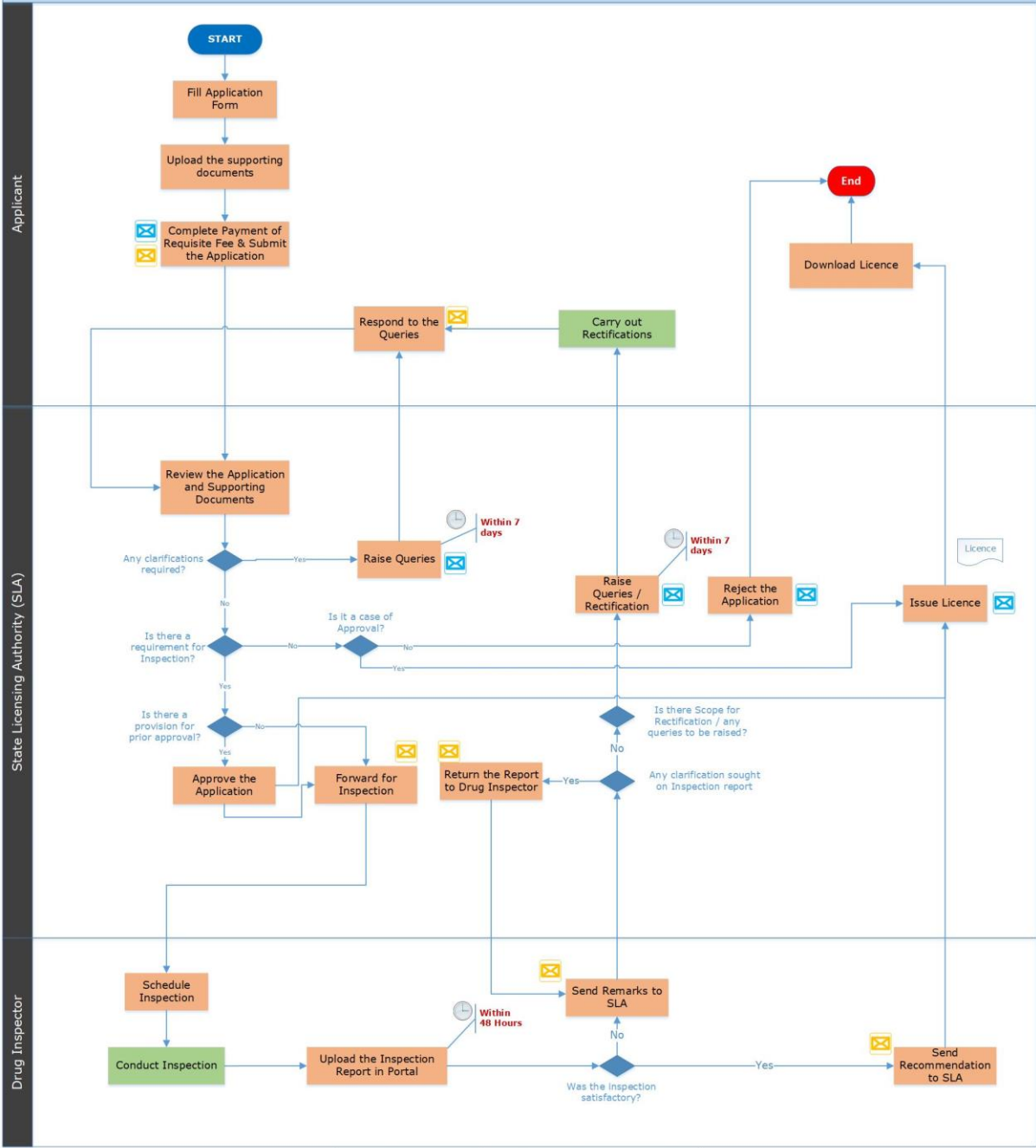
Procedure, List of Supporting Documents and Fees

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1 Procedure

Application for Change of Premises - Allopathic Drugs Sale License from Food Safety and Drug Administration Department



Legend

- Online – Single Window Portal (SWP)
- Manual Process
- SMS & Email Alert Sent to the Applicant
- SMS & Email Alert Sent to the Department Official

2 Checklist of supporting documents

S. No.	Document
1.	Photograph of the Applicant (s)
2.	Form 19 (Other than Schedule C & C1) – Retail (if applicable) as specified in the Drugs and Cosmetics Rules, 1945
3.	Form 19 (Other than Schedule C & C1) – Wholesale (if applicable) as specified in the Drugs and Cosmetics Rules, 1945
4.	Form 19 (Schedule C & C1) – Retail (if applicable) as specified in the Drugs and Cosmetics Rules, 1945
5.	Form 19 (Schedule C & C1) – Wholesale (if applicable) as specified in the Drugs and Cosmetics Rules, 1945
6.	Encumbrance Certificate or Property Tax Receipt or Sale Deed Copy of Building or Equivalent Document
7.	Residence Proof of the business owner (Rental Agreement or Lease Agreement, Passport, Aadhaar Card (UID))
8.	Authorization letter for the signatory of the application form (Board Resolution / Authorisation Letter)
9.	Copy of Pharmacy Council Registration Certificate of the Pharmacists
10.	Education Qualification (Highest Qualification) and Experience Certificate of the Pharmacist / Competent Person
11.	Legal Tenancy Affidavit
12.	Declaration Form as prescribed by the Department
13.	Purchase Bill of Refrigerator, Air Conditioner and Generator and its working condition or installation certificate
14.	Existing Licence Copy
15.	Blueprint of the Plan of the Premises Duly Signed by Licenced Surveyor and the Applicant
16.	Rental Agreement (in case of rental property)
17.	Any other relevant details or documents to establish the correctness of the details or documents or claims made with regard to the above items

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3 Fees

S. No.	Fee Type	Amount (INR)
1	Retail Sale - From 19 Other than Schedule C & C1	1,500
2	Wholesale - Form 19 From 19 Other than Schedule C & C1	1,500
3	Retail Sale - Form 19 Schedule C & C1	1,500
4	Wholesale - Form 19 Schedule C & C1	1,500

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