[Letter Head]

| | S no Product/Drug/ Vaccine Name | Manufacturer | Quantity | |
|--|---|--------------|----------|--|
| | use atas per details below. | | | |
| | use atas per details below: | | | |
| | Refer to subject cited above, we/I hereby apply for pre-import NOC for particular | | | |
| 134(I)2021 DATED 2 ND FEBRUARY, 2021. | | | | |
| SUBJECT: APPLICATION FOR NO OBJECTION CERTIFICATE UNDER S. R. O. | | | | |
| | (Karachi/Lahore/ Islamabad/ Peshawar/Quetta) | | | |
| | DRAP, | | | |
| | Additional Director/Officer In-charge, | | | |
| | | Reference no | | |
| | | Date | | |
| | | | | |

I/We do hereby solemnly affirm and state on oath as follows:

- i. The import will be made with the approval of Licensing Authority under the rule 9 of Drugs (Import & Export) Rules 1976
- ii. The drug will not be sold or distributed in the market;
- iii. The drug will be used for therapeutic purpose in the hospital or institutions only and not for the purpose of clinical trial, examination, test or analysis.
- iv. Clearance certificate will be obtained from AD (I & E) concerned at the time of Arrival of shipment before custom clearance. Consumption or utilization record must be maintained be the importer under supervision of qualified person.

It is requested to issue NOC as per subject cited S.R.O.

Name , Designation , Sign. & Stamp of Head