**FORM 7   
[See rule 14 (d) (I)]   
BATCH CERTIFICATION**

Name and Registration No. of drug ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­:  
  
Batch number of drug ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­:  
  
Name and address of the Manufacturer ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­ :

Date of Manufacture ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­ :  
  
Date of expiry, if any ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­ :  
  
  
It is hereby certified that the above­mentioned drug (s) has/have been   
manufactured and labelled in conformity with the provisions of the Drugs Act,   
1976, and the rules made thereunder.   
  
It is further certified that this/these drug (s) has/have been manufactured under   
a valid permit/license issued by the competent Health or any other authority to   
manufacture this/these drug(s).   
  
Signed ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­

Name, designation and official seal of the Signatory ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­  
­­­­­­­­­   
Place and date ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­