**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 ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­