**FORM 5-B**

[See rule 26 (3A)]

**APPLICATION FORM FOR RENEWAL OF REGISTRATION OF ALL KINDS OF DRUGS**

I / We …………………............... of ………………………………………………………

hereby apply for registration of the drug, namely …………………………………………

details of which are enclosed.

Date ………………. Signed ………………

Place ……………….

ENCLOSURES OF THE APPLICATION FOR RENEWAL OF REGISTRATION OF A DRUG

**Dosage Form:-------------------------------------------------**

1- Brand (Proprietary) name of the drug.

2- Strength of active ingredient(s) per unit, e.g., each tablet or 5ml, etc. contains.

3- Name and address of the manufacturer.

4- Name and address of the agent or indentor in case of imported drug.

5-Whether the drug is registered for local manufacture or import.

6- Patent number in Pakistan & its expiry date.

7- Name of the registered drug with its registration number and date of initial

Registration and last renewal.

8- Changes, if any, in information furnished at the time of initial registration or last

renewal.

9- If withdrawn from the market anywhere:

(i) the name of the country; and

(ii) the reasons thereof.

**UNDERTAKING**

We hereby give this undertaking that the above mentioned information is true and correct to the

best of our knowledge.

**Production Manager Quality Control Manager.**