**Checklist for Application of Contract Manufacturing**

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| **S. No.** | **Parameters** |
|  | Application on Prescribed Form 1 by Contract Giver |
|  | Copy of Constitution of Firm |
|  | National Tax Number (NTN) Certificate |
|  | Attested copy of Provisional Enlistment Certificate (Form-6) or Drug Manufacturing License of Contract Giver |
|  | Attested copy of Provisional Enlistment Certificate (Form-6) of Contract Acceptor  |
|  | Approved Section of Contract Acceptor |
|  | Name and Address of the Director, Partner, or Proprietor (Form-29 or Partnership Deed) |
|  | Proof of Payment of fee (Original Bank Receipt)  |
|  | List of Products intended to be manufactured on contract basis [along with formula, pack size and detail of primary packing material (Glass or Plastic)] |
|  | Ownership, Rent or lease detail of the premises for storage of contract manufactured products |
|  | Contract Manufacturing Agreement on stamp paper with the contract acceptor duly signed and notarized |
|  | Undertaking on stamp paper signed & notarized for establishment of own manufacturing facility within one year |
|  | Signature and Undertaking by the application signed & notarized on stamp paper. |