MCAZ Medicines Control Authority of Zimbabwe

LEF 41a

LICENSING AND ENFORCEMENT DIVISION

APPLICATION FOR AUTHORITY TO IMPORT CATEGORY IV UNREGISTERED VETERINARY MEDICINES:

Section 75 of the Medicines and Allied Substances Control Act [Chapter 15:03]

Part A (To be completed by the Applicant (Wholesale Dealers)

1. Applicant's name: …….....
2. Residential address: ...……
3. Farm/Operation address: ……..…….
4. Phone/cell number: ……
5. Email address: ……...
6. Table 1: Unregistered Veterinary Medicines to be imported under the Section 75 of the MASCA, [CAP 15:03]

Generic name	Trade name	Strength & Form	Quantity (x pack size)	Manufacturer	Source (Country)	Port of Entry*

*Medicines should be imported through approved ports of entry see Annex I of the guidelines

*six (6) Months Requirement for the Herd/flock

7. Intended Use: ……
8. Name: ……
9. Position / Rank (if in a company): ……
10. Signature: ……..
11. Date: …….....

Part B (To be completed by the Consulting Veterinary Surgeon)

12. Table 2: Clinical Condition and the Medicinal requirements of the herd/flock

Clinical Condition	Medicine (Strength & Dosage form)	Dose/animal/day	Herd/Flock size

13. I declare that:

13.1 The animals to be treated are under my care

13.2 I shall administer/ supervise administration of these medicines

13.3 I shall report all adverse events to MCAZ

13.4 I am aware that any misrepresentation, submission of misleading or false information constitutes a professional misconduct which can be reported to the Council of Veterinary Surgeons and may result in disciplinary action and criminal proceedings

14. Name Consulting Veterinary Surgeon (who will monitor use of drugs):

…….

15. Physical address: ……...

16. Phone/cell number: ……

17. Email address: ……..…….

18. Qualifications: ……...

19. Signature: ……..

20. Date: ……..

NOTE: A COMPLETE APPLICATION COMPRISES

1. A completed form
2. A Proforma Invoice/ Invoice from the supplier
3. Package insert
4. Label for the product information.
5. In cases of biologicals and vaccines the applicant is required to attach a letter/import permit from DVS confirming the prevalence of the disease/clinical condition(s) to be alleviated.
6. The requisite consignment application fee per product