

Intention to submit application(s) to the pilot joint Veterinary Medicines Zazibona Assessment Initiative

Particulars of the Applicant

Company Name:	
Business address:	
Telephone No:	
E-Mail address:	
Site/Applicant Master File Number:	

This is to indicate that we intend to submit the following applications to the pilot joint Veterinary Medicines Zazibona Assessment. *(Please note that a minimum of two countries must be selected to be eligible).*

PRODUCT INFORMATION

Date of submission	
Product (trade) name	
Active Pharmaceutical Ingredient API(s)	
Dosage form and strength	
NCE/Generic	
Target species	
Scheduling status	
Indications	
Pharmacological action	
Target countries	Botswana <input type="checkbox"/> South Africa <input type="checkbox"/> Zambia <input type="checkbox"/> Tanzania <input type="checkbox"/> Zimbabwe <input type="checkbox"/>
Foreign registration status	

We understand that we will have 60 days to submit the dossier following receipt of notification of eligibility.

Signature:

Designation:

Date:

Once completed, please send the completed form to vmpzazibona@gmail.com
VMP_SADC_April 2022