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| **Application form for an import or export authorisation for narcotics and/or psychotropic substances** | | | | | |
| * **IMPORT** | | | * **EXPORT** | | |
| **Number of annual licence/enrolment number:** | | | | | |
| **Importer** (full address) | | | **Exporter** (full address) | | |
| **Ministerial code**  (if applicable) | **Quantity** | **Description of the goods (shape, name, dose)**  (maximum fifteen narcotics or psychotropic substances per application, lines may be added where necessary)[[1]](#footnote-1) | | | **Quantity + name of anhydrous base** |
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| * **For re-export** * **Intended for the Belgian market** * **IMP (Investigational Medicinal Product)** * **Other (specify):** | | | | * **Reagents/reference standard(s) for research:** | |
| **Date of application:** | |  | | | |
| **Responsible person or pharmacist:** | | Name and signature:  Telephone number:  E-mail: | | | |

1. Not applicable for an application for reference standards. A list may be added as an attachment if required. [↑](#footnote-ref-1)