

ANNEXURE VIII
NAMIBIA MEDICINES REGULATORY COUNCIL



MINISTRY OF HEALTH AND SOCIAL SERVICES
APPLICATION FOR APPROVAL OF TRANSFER OF CERTIFICATE OF
REGISTRATION
(Section 21 of the Act)
(Regulation 10)

TO: FROM: (Name and address of applicant)
The Registrar of Medicines
Namibia Medicines Regulatory Council
Ministry of Health and Social Services
Private Bag 13198
WINDHOEK

I,.....
(full names and surname of applicant and, if the application is made on behalf of a body corporate, the name of the body corporate) being the holder of a certificate of registration in respect of
.....
(name of medicine approved by the Council under section 19(8)) of the Act) with
.....
.....

(registration number allocated to the medicine under section 19(9) of the Act) and registered on (date of registration of the medicine) hereby apply for approval for the transfer of the certificate of registration attached hereto to: (full names and surname of the person to whom the certificate is to be transferred) of (postal and physical business address)* / or (name of body corporate) of (postal and physical business address)*

.....
Signature of applicant **Date**

* Delete whichever is not applicable.

Note: Please attach proof -

- (a) of incorporation or registration of the body corporate, as the case may be; and
- (b) that the person or body corporate concerned qualifies in terms of the Medicines Control Act, 2003, as a person to whom the certificate concerned may be transferred.