



FOOD AND DRUGS AUTHORITY

DOC. TYPE: FORM

DOC NO.: FDA/DIS/FOR - 09

Page 1 of 4

REV. NO.: 00

TITLE: APPLICATION FORM FOR REGISTRATION AS IMPORTER

**APPLICATION FORM FOR REGISTRATION AS AN IMPORTER  
OF  
FINISHED PHARMACEUTICAL PRODUCTS, BIOLOGICAL  
PRODUCTS, HERBAL MEDICINES, FOOD SUPPLEMENTS AND  
PHARMACEUTICAL RAW MATERIALS.**

CHECKLIST

Applicant's  
Check list

FDA  
Double Check

Covering Letter

Signed Declaration

Fully Completed Application Form (Appendix I, II and II)



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Page 2 of 4

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**APPLICATION FORM FOR REGISTRATION AS AN IMPORTER OF FINISHED PHARMACEUTICAL PRODUCTS, BIOLOGICAL PRODUCTS, HERBAL MEDICINES, FOOD SUPPLEMENTS AND PHARMACEUTICAL RAW MATERIALS.**

(Please complete each section of this application form as a Word document. Please submit a printed version of the completed form along with a covering letter addressed to:

**THE CHIEF EXECUTIVE  
FOOD AND DRUGS AUTHORITY  
P. O. BOX CT 2783 CANTONMENTS - ACCRA  
GHANA.**

**A. APPLICANT DETAILS**

1. Name of Company:.....

2. Postal Address:.....

Tel ..... Fax.....E-mail.....

Location of Company: .....

Date of Incorporation of Company: .....

Registration number of Company: .....

**B. ITEMS TO BE IMPORTED (Tick as appropriate)**

(a) Finished Pharmaceutical Products (human or veterinary)

(b) Biological Products (human or veterinary)

(c) Homeopathic medicines

(d) Herbal medicines

(e) Food Supplements

(f) Pharmaceutical raw materials



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Page 3 of 4

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Other (Please specify) .....



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Page 4 of 4

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Declaration

I.....hereby declare that the information provided above is true and correct.

Signature & Stamp: ..... Date: .....

(Chief Executive Officer)

**NB.** Please attach a copy each of the following documents:

- (i) Certificate of registration from the Registrar-General's department.
- (ii) Current Pharmacy Council Business Operation License (If Items to be imported are Finished Pharmaceutical/Biological Products).
- (iii) List of items to be imported.