Form MD-7

[See sub-rule (1) of rule 21 and sub-rule (2) of rule 21]

Application for Grant of Licence to Manufacture for Sale or for Distribution of Class C or Class D

1. N	ame of	Applicant:									
2. N	ature an	d constitut	tion of ma	anufacturer:							
(i	.e. prop	rietorship,	partnersh	nip includin	g Limited						
L	iability	Partnershij	p, private	or public co	ompany, so	ociety,					
tr	ust, oth	er to be spe	ecified)								
3. (i)	Corpo	rate/ regist	ered offic	e address ir	cluding						
te	lephone	number, r	nobile nu	mber, fax n	umber and	e-					
m	ail id:										
(i	(ii) Manufacturing site address including telephone										
nι	ımber, ı	mobile nun	nber, fax	number and	l e-mail id:						
(i	ii) Addı	ess for cor	responde	nce:							
	[corp	orate/ regis	stered offi	ice/ manufa	cturing site	e]					
1. D	etails of	medical d	levice(s) t	to be manuf	actured [A	nnexed]:					
5. W	hether	substantial	equivale	nce to a pre	dicate devi	ce is claimed: ((Yes/ No)				
5. Fe	e paid	on		Rs		receipt	t/challan/trans	action id		_•	
7. I l	nave en	closed the	document	ts as specifi	ed in the F	ourth Schedule	of Medical D	evices R	ules, 2017.		
3. I ł	nereby s	state and u	ndertake t	that:							
(i)	the ma	nufacturing	g site is re	eady for auc	lit or shall	be ready for au	idit on		in acc	ordance with	h
t	he requi	irements of	f Medical	Devices Ru	ıles, 2017.						
		comply v Rules, 201		ne provision	ns of the D	Orugs and Cosr	metics Act, 19	940 (23	of 1940) and	the Medica	.1
	e: :									Sign e and designa e signed digi Anne	tally]
	S.N.	Generic	Model	Intended	Class	Material of	Dimension	Shelf	Sterile or	Brand	1
	,-	name	No.	use	of	construction	(if any)	life	Non	Name (if	
					medical		`		sterile	registered	

S.N.	Generic	Model	Intended	Class	Material of	Dimension	Shelf	Sterile or	Brand
	name	No.	use	of	construction	(if any)	life	Non	Name (if
				medical				sterile	registered
				device					under the
									Trade
									Marks
									Act,
									1999)