## FORM FOR CLAIMING REIMBURSEMENT OF REGISTRATION CHARGES PAID FOR REGISTRATION ABROAD OF PHARMACEUTICAL/BIOTECHNOLOGICAL/AGRO CHEMICAL PRODUCTS

## Date:

1.	Name of the firm with full address	IEC No.
2.	EH/TH Certificate	No. & Date: Valid Up to
	Whether SSI/Non-SSI/Trader	, and op to
3.	FOB Value of exports for the preceding financial year	Rs. In Crores:
4.	Particulars of products registered by the Company	Name of the Product: Category: Pharma/Biotech/Agro-chem
		Place:
5.	Particulars of certificate procured	Country: Date of letter/certificate
Ι.	from Ministry of Health/	Date of letter/certificate
	Agricultural etc. of Foreign	
	Country along with receipt for	Amount paid in US(\$)/Euro(€)/ Foreign
	payment of registration fee	currency and Indian (Rs.)
6.	Whether certificate from Indian	
	mission concerned certifying the	
	amount paid towards registration	
7.	charges is enclosed  Details of registration fees claimed	
/ .	in past:	
	and Parace	
	1.Name of the product	
	(Pharma/Biotechnological/agro-	
	chemical)	
	2. The country of registration	
	3. Date of receipt of reimbursement 4. Amount received	
8.	Details of claims of reimbursement	
0.	for the year	
9.	Enclose copy of registration	
	certificate issued by foreign agency	
	(if the certificate is in a language	
	other than English, enclose attested	
1.0	translated copy)	
10.	Enclose copy of manufacturing	
	license issued by State Drugs	
	Controller/Licensing Authority (in India) for the subject product	
	mara) for the subject product	