Wholesale New Establishment

1. Duly filled "Wholesale New Application Form"

 Make sure to select the correct application form-Form Number XVIII (Attach Annex 03)

2. Layout Plan

Following areas should be clearly mentioned in the layout plan with scale

- ✓ Entrance
- ✓ Quarantine area
- ✓ Drug storing area (Recalled area and Return area)
- ✓ Expired drug storing area
- ✓ Receiving Bay and Dispatch Bay

3. Scaled Google Map

• Make sure to mark the exact location of the proposed wholesale establishment

4. The related documents showing the ownership over the location

Copy of lease agreement

Validity of the lease agreement should be a period of minimum three (3) years. And it should be between the property owner and the person who is owner of the proposed pharmacy.

OR

- If the property is owned by relative Father, Mother, Wife/Husband, Children, Siblings only
 - Copy of deed which the relative has gained the right of ownership to the said property.
 - Affidavit of consent for the use of said location can be accepted with the proof documents of relatedness.
- If the property is owned by the owner himself,

• Copy of the deed which he/she has gained the right of ownership to the said property.

5. Declaration forms

- a. Owner (Attach Owner declaration)
- b. Responsible pharmacist (Attach pharmacist Declaration)
- Should be duly signed and dated

6. Details of the responsible pharmacist

- a. Copy of the SLMC certificate
- b. Copy of the degree certificate/diploma certificate/certificate of efficiency/certificate of proficiency
- c. Latest passport size (3.5cm ×4.5cm) colored photographs 2 pieces
 - Photographs should be taken within six months.
 - Dress code must project the professionalism
- d. Appointment letter from the company to responsible pharmacist clearly indicating the job description

7. Letter of Authorization

If.

- Local manufacturer Copy of the valid GMP report
- Importer Appointment letter as a local agent of a particular manufacturer
- Distributor- Copy of the authorization letters from manufacturer/importer appointing as the distributor of their products.
- 8. Acknowledgement (Attach Acknowledgement)
- 9. Checklist for Wholesale New (Attach Annex 08)