Letter Head

Date: ………………….

Chief Executive Officer,

National Medicines Regulatory Authority,

No.120, Norris Canal Road,

Colombo 10,

Sri Lanka.

Dear Sir,

**Subject : Consent Letter of the Authorized Local Agent**

I, ...................................................................................................................................(full name of the authorized person) …, the undersigned, hereby declare that all the information and documents submitted with this application are same as the application submitted through online.

Thank you.

Yours Faithfully,

…………………………………..

Name of the signatory:

Designation:

(Company Seal)