

APPLICATION FORM FOR IMPORT OF NARCOTIC DRUGS/ PSYCHOTROPIC SUBSTANCES
NARCOTICS DRUGS & PSYCHOTROPIC SUBSTANCES AND THEIR SALTS
(Under Narcotic Drugs & Psychotropic Substances Rules, 1985)

1.	Importer:		
	(i) Name:		
	(ii) Address:		
	(iii) CBN Registration No. : (for psychotropic substances)		
2.	Exporter:		
	(i) Name:		
	(ii) Address:		
3.	Details of substance to be imported:		
Sl. No.	Name/ Description of the substance/ preparation	Quantity of substance/ preparation	Active content of base substance
i.			
	<i>(Only four items are allowed in a single application)</i>		
4.	Port of Entry into India: (Also intimate the name of Custom office from where customs clearance will be done)		
5.	Port of Exit from Exporting country:		
6.	Mode of transport: (Air/Sea/ Surface transport)		
7.	Details of Import License issued by DCGI / Advance Authorization issued by DGFT:		
	(i) No. & Date:		
	(ii) Name of Issuing Authority		
	<i>(Original copy shall have to be enclosed) (If not applicable, specify the documents under which the import is proposed, give details separately along with copy of supported documents)</i>		
8.	Details of confirmed Proforma Invoice/ Sale Order:		
	(i) No. & Date:		
	(ii) Name of Issuing firm/ company:		
	(iii) Cost per unit/ kg	(iv) Total cost:	(v) Means of payment
	(vi) If order is not placed by the importer/exporter, then provide name and address of the intermediary/ agent who has placed the order and the consideration paid/ to be paid to them, extent of his role in the said transaction in respect of both intermediaries in India and abroad. <i>(Describe in detail):</i>		
	<i>(An attested copy of the purchase order or accepted proforma invoice shall have to be enclosed. If the document is not in English language, an authentic copy translated in English shall have to be enclosed)</i>		
9.	Details of Drug License issued by the State Drugs Controller/ FDA:		
	(i) License No. & Date:		
	(ii) Validity:		
	(iii) Name & address of Issuing Authority		
	<i>(A attested copy of the license along with the product list shall have to be enclosed)</i>		
10.	Details of State Excise permit (in case of Narcotic drugs):		
	(i) Permit No. & Date:		
	(ii) Validity:		
	(iii) Name & address of Issuing Authority		
	<i>(An original copy of the Excise permit shall have to be enclosed)</i>		
11.	Details of fee for each import certificate:		
	(i) Demand Draft No. & Date: <i>(in favour Drawing & Disbursing Officer, Central Bureau of Narcotics payable at Gwalior)</i>		
	(ii) Name of Issuing Bank:		
	The undersigned hereby declares that the above information submitted by me is to the best of my knowledge complete and correct. It is certified that the above drugs/ substance is required for medicinal and scientific purposes. We give an undertaking that the drug held by us in stock and the quantity now being obtained would not exceed the limit of possession allowed under the license.		

Date:

Signature & Seal of Exporter

Name & Designation of the signing Person:

e-mail address of signing person:

e-mail address of company:

Mobile No.:

Telephone No.:

Note: Import of consignment through Bank/Post Office Box/Courier is not allowed.

**BACKGROUND INFORMATION TO BE SUBMITTED BY IMPORTERS OF
NARCOTIC DRUGS & PSYCHOTROPIC SUBSTANCES**

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The information/ questions below are intended to assist the Central Bureau of Narcotics to deal expeditiously with this application. Failure to provide full answers may lead to non-issuance of import certificate

1. To what use/ purpose will the narcotic drugs/ psychotropic substance(s) be put and by whom? Provide details thereof.
2. Present stock of the drug with the importer.
3. Disposal/ requirement of the quantity of drug to be imported (*Quantity to be estimated from pending indents and actual transaction in the preceding/ calendar year*):
4. Whether the importer is -
 - (a) Sole agent of manufacturer abroad, or
 - (b) Manufacturer of preparation containing manufactured drugs/ psychotropic substance(s)
5. Has your company been authorized previously by Central Bureau of Narcotics to import any narcotic drugs/ psychotropic substance? If so indicate the No. & Date of the last three import certificates issued in your favour by CBN.
 - (i)
 - (ii)
 - (iii)
6. Whether the importer has submitted the details of imports and monthly return up to the preceding month in the calendar year against the import certificates issued to them? If so the date of submission of return.
7. Name of Ultimate Consignee and destination of narcotic drugs/ psychotropic substance(s) in question:
8. Is the Consignee a new customer for narcotic drugs/ psychotropic substance(s)? If so, what is the nature of customer's business
9. Please give details of instruction for packaging and labeling of consignment.
10. Is the shipment destined for, or will it transit a free trade zone, free port or bonded warehouse? If so, provide details.
11. Are you a manufacturer importer or trader importer? If so, to whom you will be selling the material/ finished product?
12. Central Excise Registration details:
Registration No. & Date:
Name & full Address of Range/ Division and Commissioner ate:
(If an applicant is not having Central Excise Registration, provide the details of other registrations (eg. Green-card, SEZ certificate, Sales Tax No.) as a separate annexure to this application form)

Declaration by applicant:

I confirm that to the best of my belief all the information provided in this form is true.

Date:

Signature & Seal of Exporter

Name & Designation of the signing Person:

e-mail address of signing person and company:

Mobile No.:

Telephone No.: