

भारत के नारकोटिक्स आयुक्त केन्द्रीय नारकोटिक्स ब्यूरो भारत सरकार, वित्त मंत्रालय 19, माल रोड, मुरार, ग्वालियर – 474006	 सत्यमेव जयते	Narcotics Commissioner of India Central Bureau of Narcotics Govt. of India, Ministry of Finance 19, The Mall, Morar, Gwalior (M.P.) – 474006
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F.No. XVI/5/13/O/OSR/2024

Dated: 04.03.2025

PUBLIC NOTICE

Reference is invited towards this office Public Notice dated 23.09.2024 vide which the format of Quarterly Returns prescribed vide Public Notice dated 22.08.2024 were kept on hold to be submitted by the parties registered under Rule 65 of the NDPS Rules, 1985.

2. After having stake holder consultations, it has been decided to prescribe new format of Quarterly Returns for **Manufacturers of Bulk Psychotropic Substances** and **Manufactures of Preparations of Psychotropic Substances**. The same are enclosed with this Public Notice and also uploaded in our website www.cbn.nic.in.

3. It is to clarify that there is no requirement of separate filing of Quarterly Return for Research and Development. The same may be included by the respective parties in the Quarterly Returns of Manufacturers of Bulk Psychotropic Substances and Manufactures of Preparations of Psychotropic Substances.

4. The trader/wholesalers **registered with the Narcotics Commissioner** are required to submit their Quarterly Returns in the prescribed format.

5. All the companies registered with Narcotics Commissioner on the CBN Online Portal for psychotropic substances are directed to file/submit the returns in the prescribed pro-forma on the dedicated mail ID (online.returns@cbn.nic.in) in **single PDF (signed & attested) and also Excel sheet before the last day of the month following the Quarter till this facility gets fully functional in CBN Online Portal**. The formats of Quarterly Returns (in PDF as well as Excel) are available on the CBN official Website www.cbn.nic.in.

**By the Order of
Narcotics Commissioner**

Quarterly return for Manufacture of Psychotropic substances - API (Active Pharmaceutical Ingredient)

Return for the quarter ending on _____

CBN Registration number : _____

1. Name of manufacturer and Address:
2. Name of the Psychotropic Substance:
3. Details of manufacture and sale

Opening balance	Opening Balance of QC Samples	Quantity manufactured (Kgs.)	IMPORTS / SALES RETURN				Sale													Closing Balance 20= (8)+ (12+15+17+18+19)	Closing Balance of QC Samples 21= 2+17	Remarks, if any
			Name of Consignor	Import certificate no. / CBN Registration No	Quantity imported / Sales return (Kgs.)	Total (progressive total of Column 6) Kgs.	Domestic Sale				Export				Losses		Consumption					
							Total Quantity in hand during the Quarter 8=1+3+7	CBN Registration number	Name and Complete address of the Consignee	Quantity (Kgs.)	Total (progressive total of Column 11) Kgs.	CBN Export Authorisation No. and date	Name and address of foreign consignee	Quantity (Kgs.)	Total (progressive total of Column 15) Kgs.	QC Samples issued during the Quarter	Damage/Natural Calamities/Destruction of expired goods/Testing & Analysis/ Research & Development**	Captive consumption***				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
0.000000		0.000000			0.000000	0.000000					0.000000	0.000000			0.000000	0.000000		0.000000	0.000000			
0.000000		0.000000				0.000000					0.000000				0.000000			0.000000	0.000000			

** Quantity for individual purpose is to be mentioned in the note.

*** Separate return is to be filed for captive consumption for manufacture of psychotropic preparations

*** The Column 20 may be used in the Formula if and only if there is Damage/Natural Calamities/Desctrction of expired goods (formulations)

Certified by authorized signatory that the information given above is correct and the relevant records are available with me/us

Date : _____
 Place : _____
 Email ID : _____
 Mobile No : _____

Signature
 Name : _____
 Designation : _____

- Note :
- 1 The quantity should be indicated in Kilograms.
 - 2 For each Psychotropic Substances, Separate return shall be filed.

Annexure – II
Quarterly Returns of Manufacture of preparations of Narcotic Drugs and Psychotropic Substances

Return for the quarter ending on _____

CBN Registration Number _____

- 1 Name of manufacturer and Address : _____
- 2 Name of Psychotropic Substances : _____
- 3 Details of Procurement, Manufacture and sale _____

Opening Balance (A)			Receipt (B)												Consumption / Production (C)										Sale (D)						Closing balance (E)				Remarks	
Product name with strength*	Quantity	Drug Content in Kgs.**	Domestic procurement				Import				Quantity of bulk drug utilised (Kgs.)		Quantity of preparations manufactured/Stock of narcotic drugs or psychotropic substances in manufacture		*Processing loss, if any	QC Samples	Damage/Natural Calmities/Destruction of expired goods/Freezing & Analysis /Research & Development***	Domestic Sale		Export		Closing balance (E)														
			CBN Registration number	Name and Address of Consignor	Quantity of bulk drug (Kgs.)	Total (progressive total of Column 9) Kgs.	CBN Import Certificate no.	Name of Consignor	Quantity Imported in Kgs.	Total (progressive total of Column 13) in Kgs.	Total Bulk Drug In hand during the Quarter: 4-5+10+14	Product name with strength†	Quantity	Export Authorisation Number				Name and address of foreign consignee	Product	Quantity	Work in process (WIP)	Quantity of Preparations**** (24+25+29+30)	***Drug Content in Kgs.	QC Samples= 6+20	Bulk drug in Kg. (16+29+32)											
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37

* Type of product, i.e. Tablets/Injections/Vials/Bottles/Patches is to be mentioned along with Strength
 ** Drug content shall be mentioned as per strength of the product.
 *** The Column 20 may be used in the Formula if and only if there is Damage/Natural Calmities/Destruction of expired goods (formulations)
 **** Quantity for individual purpose is to be mentioned in the note.
 Note: Sales returns / Return of expired stocks can be shown in at Column No.16 & 17 and mention in the remarks

Certified by authorized signatory that the information given above is correct and the relevant records are available with me/us

Signature
 Name :
 Designation :

Date : _____
 Place : _____
 Email ID : _____
 Mobile No : _____

Note :
 1 The quantity should be indicated in Kilograms.
 2 For each Psychotropic Substances, Separate return shall be filed.