

**DEPARTMENT OF HEALTH
PHARMACEUTICAL SERVICE
INSPECTION AND LICENSING SECTION**

382 Nam Cheong Street,
3/F, Public Health Laboratory Centre, Kowloon.
Tel. 2319 8467 Fax: 2147 0457

衛生署藥劑事務部

督察及牌照組

九龍南昌街 382 號

公共衛生檢測中心 3 樓

電話 : 2319 8467 傳真 : 2147 0457

**Application for Licence for Listed Seller of Poisons
列載毒藥銷售商牌照申請書**

FOR OFFICIAL USE ONLY (不必填寫本欄)

Date: _____

Misc. Receipt No.: _____

Application Fee: _____

Checked By: _____

PART A 甲部 DETAILS OF APPLICANT 申請人資料

Name of Business (In English)

商號名稱 (中文)

Address of Business 商號地址

Name of Business at the premises (if different from above)

設在該處所的商號名稱 (如與上述不同)

Address of premises (if different from above)

處所地址 (如與上述不同)

Business Registration Certificate No. 商業登記證號碼

Telephone No. of the premises 處所電話號碼

Fax No. 傳真號碼

Name of person in charge of business (In English)

掌管業務的負責人姓名 (英文)

Name of person in charge of business (In Chinese)

掌管業務的負責人姓名(中文)

H K Identity Card No.

香港身份證號碼

Post 職位 * Proprietor 東主/ Partner 合夥人/ Director 董事 / Others, please specify 其他, 請註明

(* Delete whichever is inapplicable 請將不適用的刪去)

PART B 乙部 DECLARATION OF APPLICANT 申請人聲明

We wish to apply for a Licence for Listed Sellers of Poisons under the Pharmacy and Poisons Ordinance. We hereby declare that the information given in this application is true and correct.

我們欲根據《藥劑業及毒藥條例》申請列載毒藥銷售商牌照。我們現聲明此申請書內所填報的資料，均全屬確實無誤。

Signature 簽署

Company Stamp

公司蓋印

Full name of Signatory

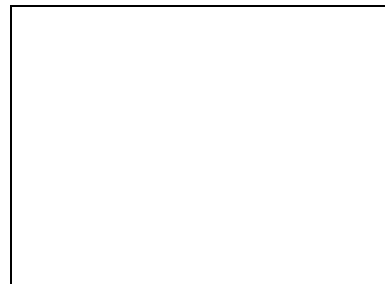
簽署人全名

Signed on behalf of

代表簽署商號

(Name of business 商號名稱)

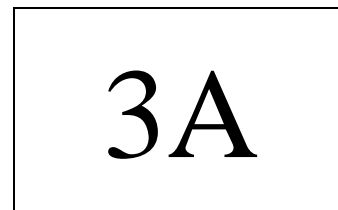
Date 日期



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CHECKLIST

Application for Licence for Listed Seller of Poisons

Please submit this checklist with the following documents. If you have answered “No” to any question, please provide a written explanation.

<u>Have you submitted</u>	<u>Yes</u>	<u>No</u>
(1) A completed application form ?	<input type="checkbox"/>	<input type="checkbox"/>
(2) A crossed cheque of HK\$455 payable to “The Government of the Hong Kong Special Administrative Region” being the statutory application fee ?	<input type="checkbox"/>	<input type="checkbox"/>
(3) Copy of Business Registration Certificate ?	<input type="checkbox"/>	<input type="checkbox"/>
(4) (a) For limited companies only : (i) Copy of Certificate of Incorporation <u>and</u> (ii) Copy of Directors’ List (e.g. “Form AR1” from Companies Registry or for newly formed limited companies, photocopy of a full set of “Form NC1” or “Form NC1G”) ? OR (b) For companies run by sole proprietors only : Copy of “Form 1(a)” from the Business Registration Office ? OR (c) For companies run by partners only : Copy of “Form 1(c)” from the Business Registration Office ?	<input type="checkbox"/>	<input type="checkbox"/>
(5) A list including name(s) in English and Chinese, Hong Kong Identity Card number(s) and posts of sole proprietor/ partners/ directors and staff ?	<input type="checkbox"/>	<input type="checkbox"/>

(PS 02/2010)

Have you submitted

Yes

No

(6) A signed declaration of each owner (i.e. sole proprietor or partner) or director, and each staff member indicating whether he/she has been an owner, a director or an employee of other trader(s) of western medicines (i.e.importer/ exporter, retailer, wholesaler or manufacturer, regardless whether the trader is still in business)? [If yes, please list out the relevant information, including the English name(s) of the trader(s) and the period involved]

(7) Statement of relevant experience of sole proprietor, partners, directors and all staff members ?

(PS 02/2010)

Pharmacy and Poisons Ordinance (Cap. 138)

Guidelines for Application for Licence for Listed Seller of Poisons

1. A company intending to sell medicines classified as Part II Poisons should first obtain a Licence for Listed Seller of Poisons.

2. Application forms for the Licence for Listed Seller of Poisons are available free of charge by downloading from the web site <http://www.psdh.gov.hk/eps/eng/html/forms.jsp> or in person from the following address during the following hours. The completed application form together with the relevant documents indicated in the attached checklist and an application fee of HK\$ 455 should be submitted by post or in person to the following address during the following hours:

Department of Health,
Pharmaceutical Service,
Inspection and Licensing Section,
382 Nam Cheong Street,
3/F., Public Health Laboratory Centre,
Kowloon.
Tel. 2319 8467 Fax: 2147 0457

Monday to Friday

9:00 a.m. to 1:00 p.m.

2:00 p.m. to 5:45 p.m.

(up to 6:00 p.m. on Monday)

*(Closed on Saturdays,
Sundays & Public Holidays)*

3. Payment must be made by crossed cheque and made payable to “The Government of the Hong Kong Special Administrative Region”. The application fee is not refundable. A receipt for the application fee will be issued to the applicant.

4. An inspection by a pharmacist inspector will be conducted at the company’s premises. The application will be considered by an Executive Committee of the Pharmacy and Poisons Board. If approved, a Licence for Listed Seller of Poisons will be issued and sent to the applicant by mail. This licence should be kept on the premises ready for inspection by inspectors appointed under the Pharmacy and Poisons Ordinance, Cap. 138.

5. The performance pledge of the Department of Health is that applications will be approved within two months.

6. These notes are only a general guide and must not be treated as a complete or authoritative statement of the law on any particular case. Copies of the Pharmacy and Poisons Ordinance and its subsidiary legislation may be purchased by calling the Publications Sales Section of Information Services Department at 2537 1910 or by email at puborder@isd.gov.hk. Contents of the relevant legislation may also be found at the Department of Justice’s website <http://www.legislation.gov.hk>.

(PS08/2007)