FORM 7
[See rule 14 (d) (I)]
BATCH CERTIFICATION

Name and Registration No. of drug ----------

Batch number of Drug ----------

Name and address of the Manufacturer ----------

Date of Manufacture ----------

Date of expiry, if any ----------

It is hereby certified that the above-mentioned drug (s) has/have been manufactured and labelled in conformity with the provisions of the Drugs Act, 1976, and the rules made thereunder. It is further certified that this/these drug (s) has/have been manufactured under a valid permit/license issued by the competent Health or any other authority to manufacture this/these drug(s).

Signed ----------

Name, designation and official seal of the Signatory ----------

Place and date ----------