#### भारत सरकार वित्त मंत्रालय केन्द्रीय नारकोटिक्स ब्यूरो 19, माल रोड, मुरार, ग्वालियर–474006



### Government of India Ministry of Finance

Central Bureau of Narcotics 19,The Mall, Morar, Gwalior (M.P.) – 474006

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F. No.XVI/13/05/N/Q/Policy/2022-pt-I

Date: 04.11.2022

## PUBLIC NOTICE

# Application for allotment of Additional Quota of Codeine Phosphate for the year 2022

Application is invited from interested parties for allocation of additional quota of Codeine Phosphate. Application should be made in enclosed pro-forma along with requisite documents through post or e-mail (suptd-narco@cbn.nic.in) by 14<sup>th</sup> November, 2022.

For the purpose of cut-off date, application received through post or e-mail (<u>suptd-narco@cbn.nic.in</u>) between 04.11,2022 to 14.11.2022 will only be considered as having been received within time limit.

BY ORDER NARCOTICS COMMISSIONER

## APPLICATION FORM FOR ADDITIONAL ALLOTMENT OF QUOTA OF CODEINE PHOSPHATE FOR THE CALENDAR YEAR 2022

#### Details of the Applicant / Company:-

(a)	Name & address (with pin code) of the company Tel No., Fax No.			
(b)	E-mail ID of the company for making correspondence			
(c)	Quota allotted in 2022			
(d)	Quota lifted in 2022-			
	Opening balance as on 01.01.2022	Qty received in 2022 (till 30.09.2022)	Qty. consumed in 2022 (till 30.09.2022)	Closing balance as on 30.09.2022
(e)	Quantity desired as ac	dditional allocation (in k	(g.)	·

Self attested copies of the following documents should also be submitted only if these documents having validity at least up to 31/12/2022 were not submitted earlier:-

- a) Copy of valid Drug Manufacturing License (Form 25 & 26) along with approved product list issued by the concerned State Government authority.
- b) Copy of valid Possession License (NDPS 1 / MD VI / M.D. IV / L-I / L-II / N.D.L.D. / N.D.R.C. or any other license for possession of narcotic drug(s) as the case may be) mentioning the name of the narcotic drug applied for along with the possession limit.
- c) Copy of consumption details up to 30<sup>th</sup> September, 2022 (including quarterly returns of completed quarters of 2022)

The undersigned hereby declare that the above information submitted is complete and correct. It is also certified that I have gone through the aforesaid instructions.

Signature of Authorized signatory
Name:
Date
Place
Mobile No
E-mail ID: