



APPLICATION FORM FOR APPROVAL OF PROMOTIONAL MATERIALS



Tanzania Medicines & Medical Devices Authority

TMDA/DMC/MRE/F/024

Rev #: 01

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(Made under Regulation 7(4))

NB: Giving false or misleading information is a serious offence

(All information supplied in this form must be either typed or written in block capital letters.)

Table with 2 columns: Application Number, Date of submission of the dossier, and TMDA use only.

Particulars of Applicant

Form for Applicant Particulars including fields for Name, Address, Contact person, E-mail, Telephone Number, and Fax Number.

Sponsor Particulars (if different from the applicant)

Form for Sponsor Particulars including fields for Name of Sponsor, Address, and Contact person/E-mail.

Product Particulars

Form for Product Particulars including Distribution category (Prescription Only, Pharmacy Only, General Sales, ADDO Medicines) and Product Name/s.



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Active ingredient(s) and strengths of the product

- 1.
- 2.
- 3.
- 4.

Type of material: (please tick the appropriate box)

Poster [] Leaflet [] Cinema [] Outdoor/Billboard [] In/On Public Transport []
 Magazines/Newspaper [] Literature [] Radio [] Television []

Other [] please specify.....

This form shall be accompanied by:

NB: Please tick or mark X on Checklist

- [] A copy of the proposed advert (Script, Audio tape, CD, VCD, Videocassette.)
- [] Current indications of use as indicated on Certificate of Registration (where applicable). [] Copy of any research/surveys/data mentioned in advertisement (Note – further evidence to be provided if requested).
- [] Copy of previous approval (If the advertise are minder)
- [] Copy of approval for the use of a restricted/prohibited claim (if applicable).
- [] Application fee.

Applicant declaration

I, declare that the information contained within this application is true and correct.

Signed: Date:

FOR OFFICIAL USE ONLY



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Fees Tshs..... Receipt No.....

of.....

Permit granted/not granted

because.....

.....

..... Permit No..... Approved by

.....of.....

.....

.....

..... Date

.....

Director General