

REQUIRED INFORMATION/DOCUMENTS FOR LOCALLY NON-REGISTERED PRODUCTS		
TENDER REFERENCE	SUPPLIER REFERENCE	
ITEM DESCRIPTION:		
QUESTION	REQUEST	Company Comments
1-Product manufacturer site(s)/ country of origin.	Please provide valid WHO standard GMP/GDP/WDA or equivalent certificates of all manufacturing & packaging sites.	
2-Marketing Authorization Holder / country of origin.	Please provide valid GDP/WDA or equivalent from the governmental competent health authority.	
3-Supplier Name / Exporting country.	Please provide valid GDP/WDA or equivalent from the governmental competent health authority.	
4-Is this product licensed to: a-be placed on the market for use in the exporting country or b-for export only?	a (Please provide supportive documents and product license number) / b (Clarify reasons)	
5-Is this product actually on the market as a finished product in the exporting country?	Yes/No	
6-Is the offered product and its mentioned information complete and consonant with its license in the certifying country of export?	Yes/No	
7-Please confirm the product classification in the certifying country of export?	Pharmaceuticals, Herbal/Dietary/Food Supplement, active pharmaceutical ingredients (APIs)... etc. (specify)	
8-Please provide relevant available product certificates and proof of prior registration under GCC-DR, EMA, FDA, Swissmedic, TGA, Health Canada, ...	*CPP (Certificate of Pharmaceutical Product).	
	*FSC (Free Sale/Trade Certificate).	
	*(Alcohol content declaration letter) on the official manufacturer's letterhead stating that the product is free from alcohol.	
	*(Pork content declaration letter) in the official manufacturer's letterhead stating that the product is free from any materials of pork/porcine source.	
	*(Certificate of suitability for TSE) Transmissible Spongiform Encephalopathy).	

	*Non-Genetically Modified Organism (Non-GMO) declaration letter.		
	*CoA (Certificate of Analysis).		
	*Others (specify)..		
9-Please provide product labels, artwork & leaflet (for the actual product not for a sample) as marketed in the certifying country of export.	*Product Label (immediate & secondary packaging).		
	*Artwork in full color (outer, inner pack).		
	*Patient Information Leaflet (PIL) and		
	*Summary of Product Characteristics (SPC).		
10-Have you supplied this product to HMC before?	Yes (provide PO#)/ No		
11-Please provide authorization letter for exclusive/distributorship of this product in the state of Qatar.	(If available).		

HMC/PHARMA-MAY/2022

Authorized/ Responsible Company Representative:

Company Official Stamp

Name:

Date - Signature