

APPLICATION FOR RENEWAL FOR RETENTION OF A VETERINARY MEDICINE/ PESTICIDE IN THE REGISTER

(To be submitted as one original hard-copy and one electronic copy in MS-Word)

The Chief Executive Officer, Veterinary Medicines Directorate, P.O.Box 66171-00800, Westlands, Nairobi

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CEO, VMD

Application number	
Name of applicant	
Address	
Registration number of veterinary	
medicine/veterinary pesticide for	
retention	
Declaration on GMP compliance	
Declaration on change on physical	
address if applicable	
Declaration of applicant that the	
registered veterinary medicine/	
pesticide has not changed since	
registration/ previous retention	
FOR OFFICIAL USE	
Findings of pharmaco-vigilance	
Recommendations of the committee	
Approved/rejected (if rejected give	
reasons)	
Name	
Signature	Date