



**DEPARTMENT OF PHARMACEUTICAL SERVICES  
MINISTRY OF HEALTH  
BRUNEI DARUSSALAM**

**APPLICATION FORM FOR POISONS LICENCE  
(POISONS ACT 1956)**

Ref No:	Date:
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Note:

1. Incomplete application form shall not be processed.
2. Please mark with an (X) in the relevant box.
3. The relevant annexes provided must be completed.
4. The application form is to be submitted in two (2) sets and if your application is related to dealing with agrochemicals or veterinary drugs, the application form is to be submitted in three (3) sets.
5. The complete application form with the relevant fee should be submitted to the **Pharmacy Administration Section, 3<sup>rd</sup> Floor, Department of Pharmaceutical Services, Kg Madaras, Mukim Gadong 'A', Brunei Darussalam.**
6. Payment of fees can either be made in the forms of cash or cheque only. Fees paid are non-refundable. Please note that payments can only be made from **Monday to Thursday, 8am to 11.30am** (8am to 10.30am for Ramadhan month) during government working days.

Fees:

- |  |        |
|--|--------|
| a) <b>Application for Licence A or C or D</b>            | - \$15 |
| b) <b>Application for Licence A &amp; C or A &amp; D</b> | - \$25 |
| c) <b>Application for Licence A, C &amp; D</b>           | - \$40 |

**Note:** Only complete application forms submitted with confirmed payment will be processed.

**1.0 DETAILS OF APPLICANT (Poisons licence holder)**

Full Name: (Capital Letters)	Designation:
Identity Card No:	Colour:

**2.0 DETAILS OF COMPANY**

Company Name:			
Company Address:			Postcode:
Tel No:	Office:	Hand phone:	Email:

**3.0 TYPE OF POISONS LICENCE APPLIED**

- |     |                          |   |
|-----|--------------------------|---|
| 3.1 | <input type="checkbox"/> | <b>Licence A</b> - Licence to Import and Store Poisons                          |
| 3.2 | <input type="checkbox"/> | <b>Licence B</b> - Licence to Deal Generally in Poisons by Wholesale and Retail |
| 3.3 | <input type="checkbox"/> | <b>Licence C</b> - Licence to Keep and Sell Poisons by Wholesale                |
| 3.4 | <input type="checkbox"/> | <b>Licence D</b> - Licence to Keep and Sell Poisons by Retail                   |

3.5.1 For application of **Licence A or B or C**, please state the *store address*:

Store size:  Height X  Length X  width

Own store

Rented store

Permanent store

Temporary store

3.5.2 For application of **Licence B or D**, please state the *address of retail premise*:

Premise size:  Width X  Length

#### 4.0 APPLICANT'S EXPERIENCE IN HANDLING CHEMICAL POISONS

Length of experience:

Place of work:

#### 5.0 COMPANY'S CURRENT NATURE OF BUSINESS

Please state:

#### 6.0 CATEGORY OF POISON APPLIED

Annex A1 – Medicinal products (Pharmaceuticals)

**Note:** Please read the guideline on Good Storage Practice and Cold Chain Management provided if you intend to apply for a poisons licence for dealing with medicinal products for human use.

Annex A2 - Chemicals including Industrial and Laboratory Chemicals  
Applicant is required to have the necessary experience and responsibility in handling chemicals

Annex B1 - Insecticides

Annex B2 - Fungicides

Annex B3 - Herbicides

Annex B4 - Rodenticides

Annex B5 - Others: PGR, Hormones etc.

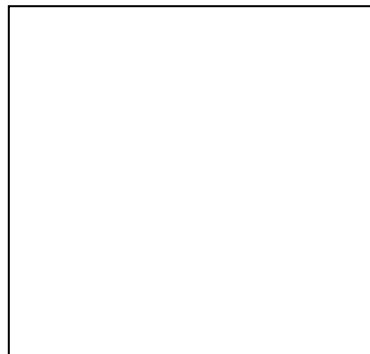
Applicant applying for poisons licence to deal with agrochemicals as in Annex B1 to B5 is required to be assessed by the Department of Agriculture and Agrifood.

Annex B6 - Veterinary Drugs

Veterinary doctor applying for poisons licence dealing with veterinary drugs requires prior approval from the Department of Agriculture and Agrifood.

I hereby declare that the information given in this form is true to the best of my knowledge. I agree to comply with all the legal requirement of the Poisons Act and its regulations, the Misuse of Drugs Act and its regulations, all the conditions as stated in the Poison licence and also any directives issued by the Poisons Licensing Officer.

Signature & company stamp



Applicant's name



CHECKLIST FOR FORM A

PLEASE ENCLOSE THE FOLLOWING	TO BE FILLED BY APPLICANT	TO BE FILLED BY RECEIVING OFFICER
1) A covering letter indicating the purpose of application for the licence.		
2) A copy of identity card of the applicant.		
3) A copy of business registration certificate (Section 16 & 17) or Certificate of Incorporation together with the Memorandum of Article & Association.		
4) For wholesale business, please submit the list of overseas suppliers together with the letters of appointment from the said companies.		
5) Product list, catalogues or material safety data sheet.		
6) If the applicant is not the owner of the company, please submit authorisation letter from company authorising the applicant to apply the licence on behalf of the company.		
7) Application related to dealing with Chemicals, Agrochemicals or Pharmaceuticals, please submit the following for the store: i) site plan; and ii) layout plan		
8) For medical or dental practitioner in private practice, the applicant is required to submit a copy of a <b>valid Annual Practising Certificate</b> issued by the Brunei Medical Board.		
9) The application form is to be submitted in two (2) sets and if your application is related to dealing with agrochemicals or veterinary drugs, the application form is to be submitted in three (3) sets.		

Application submitted by: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Application received by: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\* ANNEX A1 = Medicinal Products (Pharmaceuticals)

Trade Name	Active Ingredients	Registration No:	Manufacturer/Country

\* ANNEX A2 = Chemicals/Laboratory Chemicals

Trade Name	Active Ingredients	Formulation	Supplier/Origin

\* ANNEX B1 = Insecticides

Trade Name	Active Ingredients	Percent (%)	Formulation	Supplier/Origin

\* ANNEX B2 = Fungicides

Trade Name	Active Ingredients	Percent (%)	Formulation	Supplier/Origin

\* ANNEX B3 = Herbicides

Trade Name	Active Ingredients	Percent (%)	Formulation	Supplier/Origin

\* ANNEX B4 = Rodenticides

Trade Name	Active Ingredients	Percent (%)	Formulation	Supplier/Origin

\* ANNEX B5 = Others (*PGR, Hormones, etc.*)

Trade Name	Active Ingredients	Percent (%)	Formulation	Supplier/Origin

\* ANNEX B6 = Veterinary Drugs

Trade Name	Active Ingredients	Percent (%)	Formulation	Supplier/Origin

