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| eu-flag | | | | **Communauté européenne – EUROPEAN COMMUNITY**  **MARCHANDISES SOUMISES AU CONTRÔLE À L’EXPORTATION - GOODS SUBJECT TO EXPORT CONTROL**  **Précurseurs de drogues Règlement (cE) N° 111/2005 Autorisation d’exportation DRUG PRECURSORS – REGULATION (EC) N° 111/2005 EXPORT AUTHORISATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | 1. Exportateur (nom et adresse)-EXPORTER (NAME AND ADDRESS) | | | | | | | | | | | | | | | | 2. N° d’autorisation – AUTORISATION N°: | | | | | | | | | | | | **F** | | |
|  |  |  | | | | | | | | | | | | | | | | Délivrance-  ISSUED (DATE): | | |  | | | | Lieu- AT : | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | |  | | |  | | | |  | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 3. Procédure simplifiée d’autorisation d’exportation:  SIMPLIFIED EXPORT AUTHORISATION PROCEDURE: | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | Oui-YES: | | | | | | | | Non-NO: | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 4. Période de validité–PERIOD OF VALIDITY: | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | Début-BEGINNING: | | | | |  | | | | Fin-END: |  | | | | |
|  |  | 5. Importateur dans le pays de destination (nom et adresse)-  IMPORTER IN THE COUNTRY OF DESTINATION (NAME AND ADDRESS) | | | | | | | | | | | | | | | | 6. Autorité de délivrance-ISSUING AUTHORITY:  Agence Fédérale des Médicaments et des Produits de Santé  DG Inspection – Division Autorisations  Cellule Précurseurs  Eurostation Bloc II,  Place Victor Horta 40 bte 40  1060 Bruxelles Tél : 02/528.43.12 ou 02/528.42.42  Fax : 02/528.43.19  E-mail : [drugprecursor@afmps.be](mailto:drugprecursor@afmps.be) | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | N° d’autorisation d’importation-  IMPORT AUTHORISATION N°: | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | 7. Autre(s) opérateur(s) / (nom et adresse)  OTHER OPERATOR(S) (NAME AND ADDRESS) | | | | | | | | | | | | | | | | 8. Bureau de douane où la déclaration en douane sera présentée (nom et adresse)-CUSTOMS OFFICE WHERE THE DECLARATION WILL BE MADE  ( NAME AND ADDRESS) | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | 9. Destinataire final (nom et adresse)-ULTIMATE CONSIGNEE (NAME AND ADDRESS) | | | | | | | | | | | | | | | | 10. Point de sortie-POINT OF EXIT | | | | | | | | 11. Point d’entrée dans le pays d’importation-POINT OF ENTRY INTO THE IMPORTING COUNTRY | | | | | | |
|  |  |  | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 12. Moyens de transport-  MEANS OF TRANSPORT | | | | | | | | 13. Itinéraire-ITINERARY | | | | | | |
|  |  |  | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | |
|  |  | 14a. Substance classifiée-SCHEDULED SUBSTANCE | | | | | | | | | | | | | | | | | 15a. Code NC-CN CODE | | | | | | | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | 16a. Poids net-NET WEIGHT | | | | | | | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | 17a. % du mélange-% OF MIXTURE | | | | | | | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | 18a. N°de facture-INVOICE N° | | | | | | | |  | | | | | |
|  |  | 14b. Substance classifiée- SCHEDULED SUBSTANCE | | | | | | | | | | | | | | | | | 15b. Code NC-CN CODE | | | | | | | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | 16b. Poids net-NET WEIGHT | | | | | | | |  | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | 17b. % du mélange-% OF MIXTURE | | | | | | | |  | | | | | |
|  | |  | | | | | | | | | | | | | | | | | 18b. N° de facture-INVOICE N° | | | | | | | |  | | | | | |
|  | | 19. Déclaration du demandeur-DECLARATION BY THE APPLICANT | | | | | | | | | | | | | | | | 20. (À remplir par le bureau de douane où la déclaration en douane est présentée excepté en cas de recours à la procédure simplifiée d’autorisation d’exportation)- (FOR COMPLETION BY THE CUSTOMS OFFICE WHERE THE EXPORT DECLARATION IS MADE UNLESS THE SIMPLIFIED EXPORT AUTHORISATION PROCEDURE IS APPLIED | | | | | | | | | | | | | | |
|  | | Nom- NAME: |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | Représentant- REPRESENTING: | | | | |  | | | | | | | | (Demandeur)-(APPLICANT) | | | Numéro de référence de la déclaration en douane-REFERENCE NUMBER OF CUSTOMS DECLARATION : | | | | | | | | | Cachet-  STAMP : | | | | | |
|  | | Signature- SIGNATURE: | | | |  | | | | Date- DATE: | | |  | | | | |  | | | | | | | | |  | | | | | |
|  | | 21. (À remplir par l’autorité de délivrance excepté en cas de recours à la procédure simplifiée d’autorisation d’exportation)-FOR COMPLETION BY ISSUING AUTHORITY UNLESS THE SIMPLIFIED EXPORT AUTORISATION PROCEDURE IS APPLIED) | | | | | | | | | | | | | | | | 22. Confirmation de sortie de la CE (à remplir par les autorités compétentes au point de sortie du territoire douanier de la Communauté excepté en cas de recours à la procédure simplifiée d’autorisation d’exportation)- CONFIRMATION OF EXIT FROM THE EC (FOR COMPLETION BY THE COMPETENT AUTHORITIES AT THE POINT OF EXIT FROM THE COMMUNITY CUSTOMS TERRITORY UNLESS THE SIMPLIFIED EXPORT AUTHORISATION PROCEDURE IS APPLIED) | | | | | | | | | | | | | | |
|  | | Case 18 Information toujours manquante-  BOX 18 INFORMATION STILL REQUIRED: | | | | | | | | | Oui YES |  | | | | Non NO |  |  | | | | | | | | | | | | | | |
|  | | Cases 7, 8, 10-13 Informations toujours manquantes-  BOXES 7, 8, 10-13 INFORMATION STILL REQUIRED: | | | | | | | | | Oui YES |  | | | | Non NO |  | Date de sortie - DATE OF EXIT: | | | |  | | | | | | | | | | |
|  | | Signature- SIGNATURE: | | | |  | | | | | | | |  | | | | Signature du responsable- SIGNATURE OF OFFICER: | | | | | |  | | | | | | |  | |
|  | | Fonction- FUNCTION: | | |  | | | | | | | | |  | | | | Fonction- FUNCTION: | |  | | | | | | | Lieu- PLACE: | | | | |
|  | | Date- DATE: | | |  | | | | Cachet- STAMP: | | | | |  | | | | Date- DATE: | |  | | | | | | | Cachet- STAMP: | |  | | | |
|  | | DraftVersion5: DM/précurseurs/3evoletfreng/2006-01-20 | | | | | | | | | | | |  | | | |  | | | | | | | | | | |  | | | |