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| |  | | --- | | eu-flageu-flag | | | | | Europese Gemeenschap – EUROPEAN COMMUNITYAan Toezicht OP DE INVOER onderworpen goederen – GOODS SUBJECT TO IMPORT CONTROLDrugsprecursoren - Verordening (EG) Nr. 111/2005 Invoervergunning DRUG PRECURSORS – REGULATION (EC) N° 111/2005 IMPORT AUTHORISATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | 1. Importeur (naam en adres)-IMPORTER (NAME AND ADDRESS) | | | | | | | | | | | | | | 2. Vergunning nr-AUTHORISATION N°: | | | | | | | |  | | | | | | | | N | | | |
|  |  |  | | | | | | | | | | | | | | Afgegeven op- ISSUED (DATE): | | | |  | | | | | Te- AT: | | |  | | | | | | | |
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|  |  |  | | | | | | | | | | | | | | 3. Geldigheid-PERIOD OF VALIDITY | | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | Aanvang-BEGINNING: | | | | | | | | | | Einde-END: | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |  |
|  |  | 4. Exporteur (naam en adres)-EXPORTER (NAME AND ADDRESS) | | | | | | | | | | | | | | 5. Instantie die de vergunning afgeeft-ISSUING AUTHORITY :  Federaal Agentschap voor Geneesmiddelen en Gezondheidsproducten  DG Inspectie – Afdeling Vergunningen  Cel Precursoren  Eurostation Blok II, 06E357  Victor Hortaplein 40 bus 40  1060 Brussel  Tel : 02/528.43.12 of 02/528.42.42  Fax : 02/528.43.19  E-mail: [drugprecursor@fagg.be](mailto:drugprecursor@fagg.be) | | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  |  | 6. Andere Marktdeelnemer(s) (naam en adres)-  OTHER OPERATOR(S) (NAME AND ADDRESS) | | | | | | | | | | | | | | 7. Bevoegde instantie in het land van uitvoer-  COMPETENT AUTHORITY OF THE EXPORTING COUNTRY | | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  |  | 8. Uiteindelijke ontvanger (naam en adres)-ULTIMATE CONSIGNEE (NAME AND ADDRESS) | | | | | | | | | | | | | | 9. Plaats van binnenkomst in het land van invoer-  POINT OF ENTRY INTO THE IMPORTING COUNTRY | | | | | | | | | | | | | | | | | | | |
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|  |  |  | | | | | | | | | | | | | | 10. Vervoermiddelen en –methoden-  METHODS/MEANS OF TRANSPORT | | | | | | | | | | | | | | | | | | | |
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|  |  | 11a. Geregistreerde stof-SCHEDULED SUBSTANCE | | | | | | | | | | | | | | | | 12a. GN-code-CN CODE | | | | | | | | | |  | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 13a. Nettogewicht-NET WEIGHT | | | | | | | | | |  | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 14a. % van het mengsel-% OF MIXTURE | | | | | | | | | |  | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 15a. Factuurnr.-INVOICE N° | | | | | | | | | |  | | | | | | | |
|  |  | 11b. Geregistreerde stof-SCHEDULED SUBSTANCE | | | | | | | | | | | | | | | | 12b. GN-code-CN CODE | | | | | | | | | |  | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | 13b. Nettogewicht-NET WEIGHT | | | | | | | | | |  | | | | | | | |
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|  | |  | | | | | | | | | | | | | | | | 15b. Factuurnr.-INVOICE N° | | | | | | | | | |  | | | | | | | |
|  | | 16. Verklaring van de aanvrager-DECLARATION BY THE APPLICANT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Naam- NAME: |  | | | | | | | | | Vertegenwoordigend-PRESENTING: | | | | |  | | | | | | | | | | | | | (aanvrager)- (APPLICANT) | | | | | |
|  | | Handtekening- SIGNATURE: | | | | |  | | | | | Datum- DATE: | |  | | | | | | | | |  | | | | | | | | | | | | |
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|  | | 17. (in te vullen door de instantie die de vergunning afgeeft)-  (FOR COMPLETION BY ISSUING AUTHORITY) | | | | | | | | | | | | | | | 18. (in te vullen door het douanekantoor in de Gemeenschap)- (FOR COMPLETION BY THE CUSTOMS OFFICE IN THE COMMUNITY) | | | | | | | | | | | | | | | | | | |
|  | | Vakken 7, 9, 10: Nog te verstrekken informatie- BOXES 7, 9, 10: INFORMATION STILL REQUIRED | | | | | | | Ja YES |  | | | Neen NO | |  | | Douanereferentie- CUSTOMSREFERENCE: | | | |  | | | | | | | | | | | | | |  |
|  | |  | | | | | | | | | | | | | | | (Aangifte voor een douaneregeling of referentienummer van de goedgekeurde douaneregeling)- (DECLARATION OF ENTRY INTO THE PROCEDURE OR REFERENCE NUMBER TO THE CUSTOMS APPROVED TREATMENT OR USE) | | | | | | | | | | | | | | | | | |  |
|  | | Handtekening- SIGNATURE: | | | |  | | | | |  | | | | | | Handtekening ambtenaar- SIGNATURE OF OFFICER: | | | | |  | | | | | | | | | | |  | | |
|  | | Functie- FUNCTION: | | |  | | | | | |  | | | | | | Functie- FUNCTION: | |  | | | | | | | |  | Plaats- PLACE: |  | | | | |  | |
|  | | Datum- DATE: | | |  | | | Dienststempel- STAMP: | | |  | | | | | | Datum- DATE: | |  | | | | | | | |  | Dienststempel- STAMP: | | |  | | | | |
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