

**CHECKLIST FOR GRANT / CHANGE OF PREMISES OF WHOLESALE LICENCE**

1. Statutory form – 19 for licenses in form (20B,21B).
2. Declaration by the proprietor / Partner / Director / Competent Persons / Regd. Pharmacist with proof of residential address (Present and Permanent) for proof of residential address – Aadhar Card, Pass Port, Voter ID. ***In prescribed proforma.***
3. Partnership deed *in case of partnership firm* / List of Directors downloaded from MCA website signed by Company Secretary / Managing Director (In case of company).
4. In case of company an Affidavit under Section 34 of Drugs and Cosmetics Act, 1940 on Rs.20/- stamp paper signed by one of the Directors of the company.. ***In prescribed proforma.***
5. Special declaration by Registered Pharmacist on Rs.20/- Non-Judicial stamp paper (in case of Registered Pharmacist is appointed as C.P). ***In prescribed proforma.***
6. Self attested copy of Registered Pharmacist certificate (renewal up to date) affixed with latest original photograph and signature of the candidate (in case Registered Pharmacist is appointed as C.P) / SSC / degree certificate (in case of candidate other than R.P).
7. Plan of the premises indicating the carpet area (specifying length and breadth in meters and area in Sq.m) with the signature of Building owner and the applicant (Prop/ partners / Authorized signatory / Managing Director, etc,.) in a legal size.
8. Declaration of building owner (Photograph of the building owner with self attestation). ***In prescribed proforma.*** Self attested photocopy of the document showing the proof of ownership of the building owner for the premises to be licensed (E.C / any other legal document showing the present ownership.
9. Experience certificate of Competent person.