**APPLICATION FOR AN EXPORT AUTHORISATION OF DRUG PRECURSORS**

|  |  |
| --- | --- |
| Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **1. EXPORTER** | | | |
| Name |  | Registry code |  |
| Address |  | Email address |  |
| Phone |  | Fax |  |
| Number of the licence or registration to handle precursors |  |  | |
| **2. IMPORTER** | | | |
| Name |  | Phone |  |
| Address |  | Email address |  |
| Number of the licence or registration to handle precursors |  | Fax |  |
| **3. ULTIMATE CONSIGNEE (in case different from importer)** | | | |
| Name |  | Phone |  |
| Address |  | Fax |  |
| Number of the licence or registration to handle precursors |  | Email address |  |
| **4. DRUG PRECURSOR OR MIXTURE/NATURAL PRODUCT TO BE EXPORTED** | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drug precursor | CN code | Quantity and weight of the drug precursor exported | Quantity and weight of drug precursor in the mixture/natural product exported (if applicable) | Percentage of the precursor in the mixture/natural product exported (if applicable) |
|  |  |  |  |  |
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| **5. DETAILS OF THE TRANSPORT ARRANGEMENTS** | |
| Method and means of transport used for the export |  |
| Itinerary of the export |  |
| Expected date of despatch and arrival |  |
| Point of exit from the Customs territory of the EU |  |
| Point of entry into the importing country |  |
| Customs office where the export declaration is presented |  |
| **6. DOCUMENTS ADDED TO THE APPLICATION** | |
| *-Import authorisation issued by the importing country* | |
| **7. SIGNATURE** | |
| Name, signature and position of the applicant |  |