#### FORM NO. 8

#### [ See rule 67 B]

### APPLICATION / REQUISITION FOR STANDARD SAMPLES OF NARCOTIC DRUGS/PSYCHOTROPIC SUBSTANCES.

- 1. Name of the Organization or Agency
- 2. Full postal address of the Organization or Agency
- 3. Purpose for which sample of standard Narcotic drugs or Psychotropic Substances Is required.
- 4. Name and quantity of standard Sample required.
- Name and designation of officer
   Under whose custody the samples shall Be kept.
- 6. Copy of Stock Register of narcotic Samples maintained by the Organization duly verified by the Controlling officer
- 7. Other relevant information (if any)

Signature:
Designation:

Of Indenting Officer with Rubber Stamp

#### FORM NO. 9

[ See rule 67 B(5)]

# ANNUAL REPORT TO THE CHIEF CONTROLLER OF FACTORIES ON RECEIPT, CONSUMPTION AND BALANCE OF SAMPLES OF NARCOTIC DRUGS OR PSYCHOTROPIC SUBSTANCES.

S.No.	Narcotic drug / Psychotropic substance	Opening Balance	Receipt	Consumption	Closing Balance
1	2	3	4	5	6

## APPLICATION FORM FOR IMPORT OF NARCOTIC DRUGS/ PSYCHOTROPIC SUBSTANCES NARCOTICS DRUGS & PSYCHOTROPIC SUBSTANCES AND THEIR SALTS

(Under Narcotic Drugs & Psychotropic Substances Rules, 1985)

1.	Importer:				
	(i) Name:		Chief Controller,		
	(ii) Address:		Govt. Opium	n & Alkaloids Factories,	
			19 <sup>th</sup> Floor, Jawahar Vyapar Bhawan, Tolstoy Marg, New Delhi – 110001, India		
	(iii)CBN Registration No				
	(for psychotropic	substances)			
2.	Exporter				
	(iv)Name & Address				
3.	Details of substance to be impo	rted:			
SI.	Name/ Description of the	iption of the Quantity of		Active content of base substance	
No.	substance/ preparation	prepar	ation		
4.	Port of Entry into India: (Also	o intimate the	IGI Airport /	Air Cargo, New Delhi	
	same of Custom office from v	vhere customs			
	clearance will be done )				
5.	Port Exit from Exporting countr	y:			
6.	Mode of transportation: (Air	/Sea/ Surface	Air		
	transport)				
7.	Details of Import License issued	l by DCGI / Adva	nce Authoriza	ation issued by DGFT: Not Required	
8.	Details of confirmed Proforma	Invoice / Sale Oi	rder : NA		
9.	Details of Drug License issued b	y the State Drug	gs Controller/I	FDA: NA	
10.	Details of State Excise permit (i	n case of Narcot	ic drugs):		

11.	Details of fee for each import certificate:
	(i) Demand Draft No. & Date: (in favour of Drawing & Disbursing officer, Central Bureau of Narcotics
	payable at Gwalior)
	(ii) Name of Issuing Bank:
	The undersigned hereby declares that the above information submitted is based upon information provided by DFS, H.P.