# **Et bilde som inneholder Font, Grafikk, grafisk design, logo  KI-generert innhold kan være feil.**

# **Application – Parallel trade permit, plant protection products**

The application form shall be completed in compliance with Article 52 of Regulation (EC) 1107/2009 and the newest version of the guidance document on parallel trade of plant protection products (SANCO/10524/2012).

| **Applicant**Current or future authorisation holder[[1]](#footnote-1), i.e. the party responsible for initial placing of the plant protection product on the Norwegian market. |
| --- |
| **No** | **Information** |
| 1 | Company name      | Organisation number      |
| Address      | Postal code, town and country      |
| Contact person       | E-mail address      | Telephone no. (incl. country code)      |

| **Authorisation holder in the Member State of origin**Current authorisation holder, i.e. the party responsible for initial placing of the plant protection product on the Norwegian market. |
| --- |
| **No** | **Information** |
| 2 | Company name      | Organisation number      |
| Address      | Postal code and town      |
| Contact person       | E-mail address      | Telephone no. (incl. country code)      |
| Indicate which MS of Origin      |

| **Product information** |
| --- |
| **No** | **Information** |
| 3 | Name of the parallel trade product in Norway      | Product code      |
| 4 | Name of the reference product in Norway      | Authorization no. in Norway      |
| 5 | Name of the product in the Member State (MS) of origin      | Authorization no. in MS of origin      |
| 6 | Type of product[ ]  Chemical [ ]  Biological | Function< Choose alternative > | Other type (if applicable)< Choose alternative > |
| 7 | Packaging size      | Packaging material      |
| 8 | Physical state of the product / formulation type      |
| 9:1 | Active substance / Safener or Synergist / Organism 1      | CAS no. / strain and culture collection 1           |
| 9:2 | Active substance / Safener or Synergist / Organism 2      | CAS no. / strain and culture collection 2           |
| 9:3 | Active substance / Safener or Synergist / Organism 3      | CAS no. / strain and culture collection 3      |

| **Manufacturer** |
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| **No.** | **Information** |
| 10 | The plant protection is produced:[ ]  By the applicant[ ]  By an associated undertaking[ ]  Under licence |

| **Temporary** **representative** [[2]](#footnote-2) (if applicable)Representing the authorisation holder (i.e. the applicant in point 1) only during the application procedure |
| --- |
| **No** | **Information** |
| 11 | Company name      | Organisation number      |
| Address      | Postal code and town      |
| Contact person       | E-mail address      | Telephone no. (incl. country code)      |
| 12 | A representative should prove the appointed level of representation with **a letter of appointment** by the applicant in original. [ ]  Letter of appointment as temporary representative is attached |

| **Permanent** **representative** (if applicable)Representing the future authorisation holder (i.e. the applicant in point 1) during the authorisation period |
| --- |
| **No** | **Information** |
| 13 | Company name      | Organisation number      |
| Address      | Postal code and town      |
| Contact person       | E-mail address      | Telephone no. (incl. country code)      |
| 14 | A representative should prove the appointed level of representation with **a letter of appointment** by the applicant in original. [ ]  Letter of appointment as temporary representative is attached |

| **Invoicing address for application fee** |
| --- |
| **No.** | **Information** |
| 15 | Application fee will be paid by[ ]  Authorisation holder[ ]  Temporary representative[ ]  Permanent representative |
| Invoicing address      | Contact person      |
| Postal code and town      | E-mail address      |
|  | Country      | Telephone no. (incl. country code)      |

| **Further documentation required** |
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| **No.** | **Information** |
| 16 | Label and instruction for use[ ]  Original label and instruction for use in the MS of origin is attached[ ]  Original label and instruction for use, translated to English or Norwegian, is attached[ ]  Proposed Norwegian label and instruction for use, in Norwegian, is attached |

| **Packaging and labelling** |
| --- |
| **No** | **Information** |
| 17 | Will the product be sold in Norway in the original container?[ ]  Yes[ ]  No**If no,** give the reason why and fill out details under **Repackaging**       |
| 18 | **Details on the container of the product to be imported** |
| Size(s)      | Neck size(s)      |
| Type(s) of closure      | Packaging material      |
| 19 | A photo of the container must be provided (a product sample may also be requested)[ ]  A photo of the container attached |

| **Repackaging**In case of repackaging, give full details of responsible party and the place of repackaging and/or labelling. |
| --- |
| No | **Information** |
| 20 | Company name      | Organisation number      |
| Address      | Postal code, town and country      |
| Name of contact person       | E-mail address      | Telephone no. (incl. country code)      |
| 21 | **Details on the container of the product to be marketed in Norway** |
| Size(s)      | Neck size(s)      |
| Type(s) of closure      | Packaging material      |
| 22 | A photo of the container must be provided (a product sample may also be requested)[ ]  A photo of the container attached |

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| **Signature [[3]](#footnote-3)** |
| 23 | Applying company       | Date (dd.mm.yyyy)      |
| Signature | Name      |

|  **Completeness check for annexes** |
| --- |
| **No** | **Issue** | **Comments** | Attached | Annex No |
| Yes | No |
| 1 | Applying company/corporation’s certificate |       | [ ]  | [ ]  |       |
| 12 | Letter of appointment – Temporary representative |       | [ ]  | [ ]  |       |
| 14 | Letter of appointment – Permanent representative |       | [ ]  | [ ]  |       |
| 16 | Original label and instruction for use in the MS of origin |       | [ ]  | [ ]  |       |
| 16 | Original label and instruction for use translated to English or Norwegian |       | [ ]  | [ ]  |       |
| 15 | Proposed Norwegian label and instruction for use |       | [ ]  | [ ]  |       |
| 19 | A photo of the non-repacked container |       | [ ]  | [ ]  |       |
| 22 | A photo of the repacked container |       | [ ]  | [ ]  |       |
|  |       |       | [ ]  | [ ]  |       |
|  |       |       | [ ]  | [ ]  |       |
|  |       |       | [ ]  | [ ]  |       |
|  |       |       | [ ]  | [ ]  |       |

| **Send documentation and application form to:**  |
| --- |
| Norwegian Food Safety AuthorityDivision plants, feed and drinking water, approvals departmentE-mail: postmottak@mattilsynet.no and pesticider@mattilsynet.no Or by post/courier to:Mattilsynet / Norwegian Food Safety AuthorityDivision plants, feed and drinking water, approvals departmentGlynitveien 30, N-1400 Ski, NorwayAll documents should be submitted in a digital, searchable format.For further questions about this form, contact postmottak@mattilsynet.no. |

1. All companies that have no previously authorized plant protection product in Norway must submit a company/incorporation certificate. [↑](#footnote-ref-1)
2. The applicant is fully responsible for the placing of a plant protection product on the Norwegian market. The representative cannot hold an authorization. [↑](#footnote-ref-2)
3. If the signature is done by someone other than the applying company, a power of attorney confirming the right to sign the application on behalf of the applicant should be submitted. [↑](#footnote-ref-3)