



**Botswana Medicines Regulatory Authority**  
**Application for Permit to Import Habit Forming Medicines**  
**and/or Psychotropic Substances**  
**Form 15A**  
**(reg. 50)**

Application to be sent to:  
Chief Executive Officer  
Botswana Medicines Regulatory Authority  
Private Bag 2 Gaborone Station  
Plot no. 112 Gaborone International Finance Park  
Gaborone  
Tel: 3138730

**APPLICATION FOR PERMIT TO IMPORT**  
**HABIT FORMING MEDICINES AND/OR PSYCHOTROPIC SUBSTANCES**

(An application in terms of section 43 of the Medicine and Related Substances Act)

In accordance with the Medicine and Related Substances Act, the Single Convention on Narcotic Drugs, 1961 and the Convention on Psychotropic Substances, 1971.

I, \_\_\_\_\_  
(Name of Applicant)

registered as \_\_\_\_\_  
(Qualification and Registration Number)

of \_\_\_\_\_  
(Company and Address)

hereby apply for permit to import the following habit-forming medicines and/or psychotropic substances:

Item No.	Approved name of drug/substance and strength	Quantity and presentation of drug or substance	Purpose: medicinal, manufacture, research, scientific, other (specify)	Stock will last (number of days if applicable)

Total number of items: \_\_\_\_\_

From (name and address of exporting company):
Route of supply (by):
Port of entry (at):

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_



**BOMRA/IL/IE/P01/F01**

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**Issue No. 3.0**

NOTES: To be accompanied by a completed purchase order from the importing company specifying the exporting company.