Government of Tamil Nadu (Department of Drugs Control Administration)

Office of the Director of Drugs Control 359, Annasalai, Chennai - 600 006.

APPENDIX 1

Certificate of Pharmaceutical Product1

This Certificate conforms to the format recommended by the World Health Organization

No. of the certificate L. DIS No fize D1/4/2017 Dt. \$\frac{1}{2017}\$
This certificate is valid up to one year from the date of issue.

Exporting (certifying) country: Importing (requesting) country: THE REPUBLIC OF INDIA THE REPUBLIC OF CHILE

I.	Name and dosage form of the product	AUROFORT Dosage form: Ophthalmic Suspension
		Pack size: 5 ml, 10ml
1.1	Active ingredient(s) ² and amount(s) per unit dose ³	Prednisolone acetate USP 1%w/v Benzalkonium chloride BP 0.01% w/v Purified water BP q.s.
	For complete composition including excipients ⁴	
1.2	Is this product licensed to be placed on the market for use in the exporting country? ⁵ :Yes/No (Key in as appropriate)	Yes
1.3	Is this product actually on the market in the exporting country?:	
	Yes / No / Unknown (Key in as appropriate)	Yes
	If the answer to 1.2. is yes, continue with section 2A and omit section 2B	
2.4.1	If the answer to 1.2 is no, omit section 2A and continue with section 2B ⁶	The second secon
2.A.1	Number of product licence ⁷ and date of issue	TN 00002387 in Form 28 dated on 11/12/2007 Renewed up to 10/12/2017
2.A.2	Product licence holder (name and address):	M/s. AUROLAB, No.1 Sivagangai Main Road, Veerapanjan, Madurai – 625 020, Tamil Nadu, India
2.A.3	Status of product licence holder8:	
	(Key in appropriate category as defined in note 8)	a) Manufactures the dosage form
2.A.3.1	For categories b and c the name and address of the manufacturer producing	Target Control (as a large)
. A 4	the dosage form is 9:	Not Applicable
2.A.4 2.A.5	Is a summary basis for approval appended? ¹⁰ Yes/No (Key in as appropriate)	No
	Is the attached, officially approved product information complete and consonent with the licence? Yes/No/Not provided (Key in as appropriate)	Yes
2.A.6	Applicant for certificate, if different from licence holder (name and address) ¹² :	
2.B.1	Applicant for certificate (name and address):	Not Applicable
2.B.2	Status of applicant: (Key in appropriate category as defined in note 8)	Not Applicable
.B.2.1	For categories (b) and (c) the name and address of the manufacturer	Not Applicable
	producing the dosage form is:9	Not Applicable
2.B.3	Why is marketing authorization lacking?	Not Applicable
	Not required/Not requested/Under consideration/Refused	
		Not Applicable
.B.4	(Key in as appropriate) Remarks ¹³	Not Applicable
3	Does the certifying authority arrange for periodic inspection of the manufacturing plant in which the dosage form is produced? Yes/No/Not applicable (Key in as appropriate)	
.1	If no or not applicable, proceed to question 4. Periodicity of routine inspections (years):	Yes
.2	Has the manufacture of this type of dosage form been inspected? Yes/No	Once in a year
	(Key in as appropriate)	Yes
3.3	Do the facilities and operations conform to GMP as recommended by the	1 65
5/E-	World Health Organization? ¹⁵ Yes/No/Not Applicable ¹⁴ (Key in as appropriate)	Voc
	Does the information submitted by the applicant satisfy the certifying	Yes
	authority on all aspects of the manufacture of the product 16:	
	Yes/No (Key in as appropriate) If no, explain	Yes
Address of certifying authority:		Office of the Director of Drugs Control
		359, Annasalai, Chennai - 600 006.
Telephone Number:		+91 44 24321830
ax Number		+91 44 24321830
lame of	the authorized FERIOF CO.	OF DAILS

Signature

Stamp and date

So. Div soi door surur

Director of Drugs Control

S. ABDUL KHADER, B.Pharm., 359, Anna Salai, Chennai-600 006.

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S. SANKARANARAYA Deputy Secretary V
The Madras Chamber of Commerce & Industry

General Instructions:

Please refer to the guidelines for full instructions on how to complete this form and information on the implementation of the Scheme. The forms are suitable for generation by computer. They should always be submitted as hard copy, with responses printed in type rather than handwritten. Additional sheets should be appended, as necessary, to accommodate remarks and explanations.

Explanatory notes:

This certificate, which is in the format recommended by WHO, establishes the status of the pharmaceutical product and of the applicant for the certificate in the exporting country. It is for a single product only since manufacturing arrangements and approved information for different dosage forms and different strengths can vary.

2. Use, whenever possible, International Nonproprietary Names (INNs) or national nonproprietary names The formula (complete composition) of the dosage form should be given on the certificate or be appended.

- 4. Details of quantitative composition are preferred but their provision is subject to the agreement of the product-licence holder.
- 5. When applicable, append details of any restriction applied to the sale, distribution or administration of the product that is specified in the product

6. Sections 2A and 2B are mutually exclusive.

Indicate, when applicable, if the licence is provisional, or the product has not yet been approved.

8. Specify whether the person responsible for placing the product on the market:

a) manufactures the dosage form:

b) packages and/or labels a dosage form manufactured by an independent company; or

c) is involved in none of the above.

9. This information can only be provided with the consent of the product-licence holder or, in the case of non-registered products, the applicant. Noncompletion of this section indicates that the party concerned has not agreed to inclusion of this information. It should be noted that information concerning the site of production is part of the product licence. If the production site is changed, the licence has to be updated or it is no longer valid.

10. This refers to the document, prepared by some national regulatory authorities, that summarizes the technical basis on which the

product has been licensed.

- 11. This refers to product information approved by the competent national regulatory authority, such as Summary Product Characteristics (SPC).
- 12. In this circumstance, permission for issuing the certificate is required from the product-licence holder. This permission has to be provided to the authority by the applicant.

13. Please indicate the reason that the applicant has provided for not requesting registration.

a) the product has been developed exclusively for the treatment of conditions-particularly tropical diseases-not endemic in the country of export;

b) the product has been reformulated with a view to improving its stability under tropical conditions;

c) the product has been reformulated to exclude excipients not approved for use in pharmaceutical products in the country of import:

d) the product has been reformulated to meet a different maximum dosage limit for an active ingredient;

e) any other reason, please specify.

14. Not applicable means the manufacture is taking place in a country other than that issuing the product certificate and inspection is conducted under the aegis of the country of manufacture.

15. The requirements for good practices in the manufacture and quality control of drugs referred to in the certificate are those included in the thirty-second report of the Expert Committee on Specifications for Pharmaceutical Preparations, WHO Technical Report Series No. 823, 1992. Annex 1. Recommendations specifically applicable to biological products have been formulated by the WHO Expert Committee on Biological Standardization (WHO Technical Report Series, No. 822, 1992, Annex 1).

16. This section is to be completed when the product-licence holder or applicant conforms to status (b) or (c) as described in note 8 above. It is of particular importance when foreign contractors are involved in the manufacture of the product. In these circumstances the applicant should supply the certifying authority with information to identify the contracting parties responsible for each stage of manufacture of the finished dosage form, and the extent and nature of any controls exercised over each of these parties.

