

FORM NO. 3G

[See rule 52-O(2)]

CERTIFICATE OF RECOGNITION

No _____ Date of issue _____

This is to certify that(Name of the institution).....situated at..... is a Recognised Medical Institution to possess, dispense and sell essential narcotic drugs.

2. The institution is a Recognised Medical Institution since(mention date of the certificate issued for the first time)....

3. This certificate shall be in force fromto.....

4. The certificate is subject to the conditions stated below and to such other conditions as may be specified under the Narcotic Drugs and Psychotropic Substances Act, 1985 (61 of 1985) and the rules made thereunder.

Signature.....

Designation.....

Seal.....

Conditions of recognition

1. This certificate is non-transferable.
2. This certificate and any certificate of renewal in force shall be kept on the approved premises and shall be produced at the request of an officer authorised for the purpose by the issuing authority.