



ONLINE APPLICATION SUBMISSION PROCEDURE

APPLICATION FOR LICENCE TO SELL, STOCK OR EXHIBIT OR OFFER FOR SALE, OR DISTRIBUTE OF DRUGS OTHER THAN THOSE SPECIFIED IN SCHEDULE-C, C(1), X FOR WHOLESALE (20B, 21B) (FORM-19)

- 1. Applicant sign-in (login) to RajSSO (<https://sso.rajasthan.gov.in>) portal using his/ her SSOID as shown in figure below.

- 2. After successful sign-in (login), applicant selects “DRUG LICENCE” from the available list of applications as shown in figure below.



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3. Applicant will see the following interface i.e. CITIZEN DASHBOARD where all the applications submitted by him/ her would be listed along with their present status. Applicant clicks on “New License” option from SERVICES menu as highlighted in the figure below.

The screenshot shows the 'Medical & Health Department' Citizen Dashboard. The 'SERVICES' menu is open, with 'New License' highlighted. Below the menu is a table of applications:

S. No.	Application ID	Submission Date/ Time	Establishment Name	Type	District	Status	View
1	DRGAPP/2018-19/9715	07/05/2018 19:24:56	NB SOFTWARES	FORM-19 - RETAIL	JAIPUR	PARTIALLY SAVED	
2	DRGOFF/2018-19/9717	07/05/2018 19:28:26	NB SOFTWARES	FORM-19 - RETAIL (OFFLINE)	JAIPUR	LICENSE ISSUED BY ADC	
3	DRGOFF/2018-19/9719	07/05/2018 19:41:07	NB SOFTWARES	FORM-19 - RETAIL (OFFLINE)	JAIPUR	PARTIALLY SAVED	

Showing - 1 to 3 of 3 rows

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4. Applicant is presented with a window as shown below wherein applicant can select the license type from the list of various license types. Select Wholesale License (20B,21B) as highlighted.

The screenshot shows the 'Medical & Health Department' Citizen Dashboard with a 'Select License Type' dialog box open. The dialog box contains a list of license types, with 'Wholesale License (20B, 21B)' selected and highlighted:

- Retail License (20, 21)
- Retail License (20, 21) - For Existing Wholesaler
- Retail License With Godown (20, 21/ 20, 21 (Godown))
- Retail License With Schedule-X (20, 21, 20F)
- Wholesale License (20B, 21B)
- Wholesale License (20B, 21B) - For Existing Retailer
- Wholesale License With Godown (20B, 21B/ 20B, 21B (Godown))
- Wholesale License With Schedule-X (20B, 21B, 20G)
- Retail & Wholesale License (20, 21, 20B, 21B)
- Retail & Wholesale License With Godown (20, 21, 20B, 21B, Godown)
- Retail & Wholesale License With Schedule-X (20, 21, 20B, 21B, 20F, 20G)
- Manufacturing License (Form-24)
- Manufacturing License (Form-27)
- Godown License
- Schedule-X License (20F/ 20G/ Both)

Ok Close



5. Applicant is presented the online application form as shown below, wherein applicant enters all the required inputs and uploads the supporting documents.

Medical & Health Department

Government of Rajasthan

NARESH BAC...

Form-19 - Application for grant of a licence to sell, stock or exhibit or offer for sale, or distribute of drugs other than those specified in Schedule-C, C(1), X For Wholesale (20B, 21B)

☰
Establishment & Applicant(s) Details/ प्रतिष्ठान आवेदक (या आवेदकों) का विवरण

Application Type/ आवेदन का प्रकार +

New Application Renewal

GST Number/ जी.एस.टी नंबर

ENTER GST NUMBER

Establishment Type/ प्रतिष्ठान का प्रकार +

Select Establishment Type

Verification

Upload & Save

Add

Remove

Applicant/Partner Declaration Format/ आवेदक अथवा साझेदार के घोषणापत्र का प्रारूप
(File Type - PDF upto 5MB)

Sl. No./ क्र.सं	Applicant's Aadhaar No/ आवेदक की आधार संख्या	Name/ नाम	PAN Card Number/ पेनकार्ड नंबर	Mobile/ मोबाइल	E-Mail/ ई-मेल	Upload Declaration/ घोषणा-पत्र अपलोड करें	Action/ Upload
1	AADHAAR UID	NAME	PAN CARD NL	MOBILE	EMAIL	Choose File N...N	<input checked="" type="checkbox"/>

☰
Seller Details/ विक्रेता का विवरण

Seller Type/ विक्रेता का प्रकार : Wholesale (20B, 21B)

Registered Pharmacists Details/ पंजीकृत फार्मासिस्ट का विवरण

Pharmacist/ Competent Declaration Format/ फार्मासिस्ट अथवा सुयोग्य-जन के घोषणापत्र का प्रारूप
Experience Letter Format/ अनुभव प्रमाण-पत्र का प्रारूप
(File Type - Signature: jpg/jpeg/png/bmp upto 50 KB, Other Document: PDF upto 5MB)

Sl. No./ क्र.सं	Aadhaar No/ आधार संख्या	Pharmacist Reg. No/ फार्मासिस्ट पंजीयन क्रमांक	Valid Upto/ मान्य दिनांक	Name/ नाम	Qualification/ योग्यता	PAN Card Number/ पेनकार्ड नंबर	Mobile/ मोबाइल	E-Mail/ ई-मेल	Upload Pharmacist Registration Certificate And Declaration/ फार्मासिस्ट पंजीयन प्रमाण-पत्र एवं घोषणा-पत्र अपलोड करें	Upload Scanned Signature/ स्कैन किये हुए हस्ताक्षर अपलोड करें	Action/ Upload
1	AADHAA	ENTER	VALID	PHARMAC	--SELE	PAN CA	MOBIL	EMAI	Choose File	Choose File	<input checked="" type="checkbox"/>

Proposed Competent Person Details/ आवेदित सुयोग्य-जन विवरण

(File Type - Signature: jpg/jpeg/png/bmp upto 50 KB, Other Document: PDF upto 5MB)

Sl. No./ क्र.सं	Aadhaar No/ आधार संख्या	Name of Competent Person/ सुयोग्य-जन का नाम	Qualification/ योग्यता	Passing Year/ उत्तीर्ण वर्ष	Years of Experience/ अनुभव (वर्षों में)	PAN Card Number/ पेनकार्ड नंबर	Mobile/ मोबाइल	E-Mail/ ई-मेल	Upload Education Qualification, Experience Certificate & Declaration/ शैक्षिक योग्यता, अनुभव प्रमाण पत्र एवं घोषणापत्र अपलोड करें	Upload Scanned Signature/ स्कैन किये हुए हस्ताक्षर अपलोड करें	Action/ Upload
1	AADHA	NAME OF C	QUALIFIC	PASS	--SEL	PAN CA	MOBIL	EMA	Choose File	Choose File	<input checked="" type="checkbox"/>

Categories of drugs to be sold/ बेची जाने वाली दवाओं की श्रेणियों का विवरण +

Specified in Schedules C and C(1) excluding those specified in Schedule X (21 And/ Or 21B)

Drugs other than those specified in Schedule C,C(1) and X (20 And/ Or 20B)

To operate a pharmacy

RajCAD, DoIT & C, GoR

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Shop/ Premises Details/ दुकान/ भवन का विवरण

Address/ पता <input checked="" type="radio"/> Urban/ शहरी <input type="radio"/> Rural/ ग्रामीण	Shop/ Establishment Name/ दुकान/ संस्थान का नाम * ENTER SHOP/ ESTABLISHMENT NAME
Shop/ Building Number/ दुकान/ भवन संख्या ENTER SHOP/ BUILDING NUMBER	Lane/ Street Name/ लैन/ गली/ सड़क * ENTER LANE/ STREET
Locality/ मोहल्ला * ENTER LOCALITY	District/ ज़िला * -- SELECT DISTRICT --
City/ शहर * --SELECT CITY--	Ward Number/ वार्ड संख्या * --SELECT WARD--
PIN Code/ पिन कोड * ENTER 6 DIGIT PIN CODE	State/ राज्य RAJASTHAN
Mobile No./ मोबाइल नंबर * ENTER 10 DIGIT MOBILE NUMBER	Email/ ई-मेल ENTER EMAIL ADDRESS
Police Thana/ पुलिस थाना * ENTER POLICE THANA	Shop Size (In Sq. Feet)/ दुकान का क्षेत्रफल (वर्ग फीट में) * ENTER SHOP SIZE
Shop Ownership/ दुकान का स्वामित्व * <input checked="" type="radio"/> Own (स्वयं का) <input type="radio"/> Lease/ Rent (लौज़/ किराये पर) <input type="radio"/> Allotted Premise (आवंटित परिसर)	Ownership Title Deed/ ओनरशिप टाइटल डीड अपलोड करें * (File Type - PDF upto 5MB) Choose File NO FILE CHOSEN
Upload Map/ नक्शा अपलोड करें (File Type - PDF upto 5MB) * (File Type - PDF upto 5MB) Choose File NO FILE CHOSEN	Upload Form-19/ फॉर्म-19 अपलोड करें (File Type - PDF upto 5MB) * (File Type - PDF upto 5MB) VIEW Choose File NO FILE CHOSEN

Refrigerator Details (If Any)/ रेफ्रिजरेटर का विवरण (यदि हो तो)

Capacity of Refrigerator (In Litres)/ रेफ्रिजरेटर की क्षमता (लीटर में) ENTER CAPACITY OF REFRIGERATOR	Make/ Model of Refrigerator/ रेफ्रिजरेटर का मेक/ मोडल ENTER MAKE/ MODEL OF REFRIGERATOR
Upload Refrigerator Purchase Voucher/ Declaration/ रेफ्रिजरेटर के खरीद की रसीद अथवा घोषणापत्र अपलोड करें * (File Type - PDF upto 5MB) DOWNLOAD FORMAT Choose File NO FILE CHOSEN	

Payment Details/ भुगतान का विवरण

Licenses Fee/ लाइसेंस शुल्क ₹ 3000.00

Declaration/ घोषणा

Do you have separate facility for storage of homeopathic medicines? Yes/ हाँ No/ नहीं

Following storage facilities are provided in shop: *

Racks/ Shelves
 General Hygeinic Conditions Satisfactory

Following arrangements have been made: *

Shop height is greater than 8 feet
 The Name of Firm Displayed On Upperside of Shutter With Paint Including Mobile Number/ Chemist And Drugist Mentioned For Retail Sale Shop
 For Keeping Expired Drugs With Display "Expired Drugs Not For Sale"
 For Storing Veterinary Drugs With Display "Veterinary Drugs Not For Human Use- Treatment Of Animals Only"

मैं/ हम एतद द्वारा घोषणा करता हूँ/ करते हैं कि ऊपर दिए गए समस्त विवरण मेरे/ हमारे ज्ञान एवं विश्वास के अनुसार पूर्णतः सत्य और सही है एवं उसमे कोई तथ्य छिपाया नहीं गया है। मैं/ हम उपरोक्त तथ्यों से भली भाँति परिचित हूँ/ हैं की यदि मेरे/ हमारे द्वारा दी गयी सूचना गलत या असत्य पायी जाती है तो मैं/ हम कानूनी रूप से दंड का भागीदार होऊँगा/ होँगे। साथ ही मेरे/ हमारे द्वारा प्राप्त की गयी सुविधाएँ भी समाप्त मानी जाएगी।

Save Cancel

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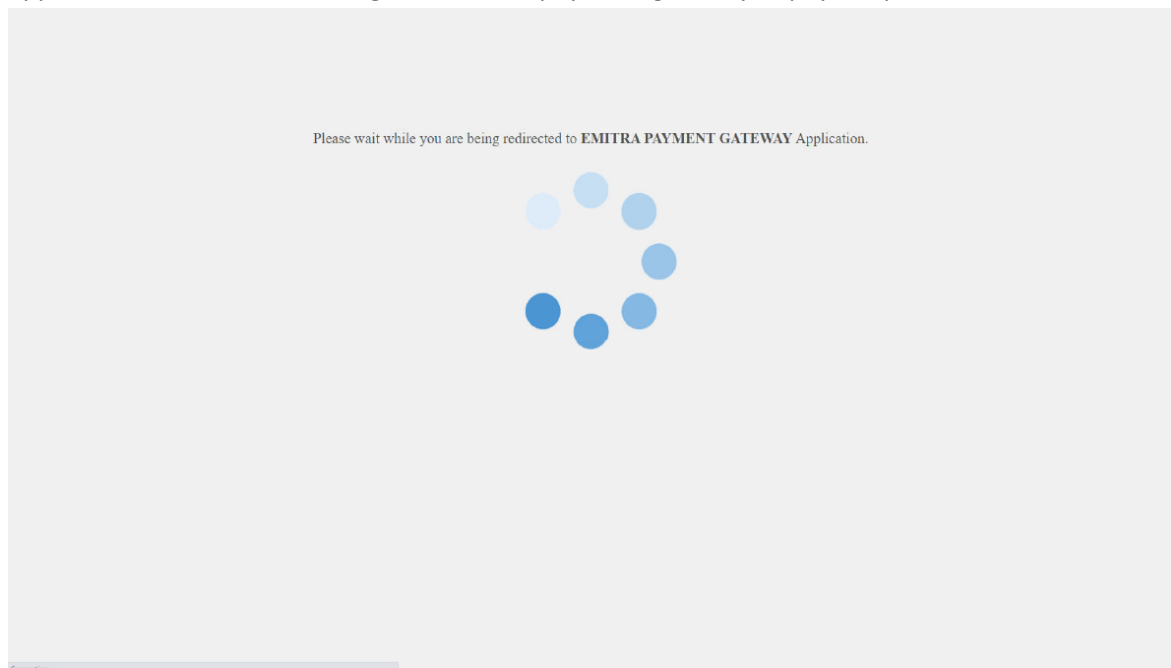


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- Applicant can use the SAVE button to partially save the form if he/ she doesn't have all the details required at the time of form filling. On click of SAVE button, system presents a confirmation window as shown below to submit the application. If all the required information and uploading the supporting documents is available, applicant clicks "YES".

The screenshot displays the 'Medical & Health Department' interface for the Government of Rajasthan. A user named 'NARESH BAC...' is logged in. The main form area is partially obscured by a modal dialog box titled 'Save/ Submit'. The dialog box contains the text: 'Your application form is saved successfully. Do you want to submit the application now?' and three buttons: 'Yes', 'No', and 'Close'. The background form includes fields for 'स्वामित्व' (Ownership) with options 'Own (स्वयं का)', 'Lease/Rent (लीज़/ किराये पर)', and 'Allotted Premise (आवंटित परिसर)', a 'वाइटल डॉड' (Vital Dose) field, and a 'Form-19/ फॉर्म-19' field. Below the dialog, there are sections for 'Refrigerator Details' and 'Payment Details/ भुगतान का विवरण'. The footer of the page states: 'Site designed, developed & hosted by Department of Information Technology & Communication, Govt. of Rajasthan. For any assistance please mail us at : drugcontroller2.mh@rajasthan.gov.in'.

- On click of Yes button, all details provided by the applicant are validated and if all data is valid, applicant is then redirected to government's payment gateway to pay the predefined license fees.





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8. On successful payment, application is termed as submitted successfully. Application is forwarded to respective A.D.C. (Additional Drug Controller) for further processing. Applicant is also notified of this event through SMS/ Email. Application status is now updated as “PENDING WITH ADC” as shown below.

Medical & Health Department
Government of Rajasthan

NARESH BAC...

SERVICES CITIZEN DASHBOARD

Search... Show Rows 10

S. No.	Application ID	Submission Date/ Time	Establishment Name	Type	District	Status	View
1	DRGAPP/2018-19/9715	07/05/2018 19:24:56	NB SOFTWARES	FORM-19 - RETAIL	JAIPUR	PARTIALLY SAVED	
2	DRGOFF/2018-19/9717	07/05/2018 19:28:26	NB SOFTWARES	FORM-19 - WHOLESALE	JAIPUR	PENDING WITH ADC	
3	DRGOFF/2018-19/9719	07/05/2018 19:41:07	NB SOFTWARES	FORM-19 - RETAIL (OFFLINE)	JAIPUR	PARTIALLY SAVED	
4	DRGAPP/2020-21/60095	21/01/2021 16:47:46	SHREE SANJEEVANI MEDICALS.	FORM-19 - RETAIL	BARAN	LICENSE ISSUED BY ADC	

Showing - 1 to 4 of 4 rows

First Previous 1 Next Last

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9. A.D.C will forward the application to D.C.O for inspection or can do on its own and submit inspection report.
10. D.C.O. will conduct site inspection and submit the Report online. Application will be forwarded back to A.D.C
11. A.D.C will Issue License based on the inspection report uploaded by the D.C.O.
12. Applicant can login to the system to download the digitally signed (eSign) Licenses (Form 20, Form 21) issued by A.D.C.
13. Licenses can be downloaded from the License Details section on view page as highlighted below.

License Details/ लाइसेंस का विवरण

Sl. No./ क्र.सं.	License Form/ लाइसेंस फॉर्म	License Number/ लाइसेंस नंबर	Issued On/ जारी दिनांक	Valid Upto/ मान्य दिनांक	Renewed/ Retained Upto/ दिनांक तक नवीनीकरण	Status/ वर्तमान स्थिति	Download
1	FORM 20B	D [REDACTED]	0 [REDACTED] 1			ACTIVE	
2	FORM 21B	D [REDACTED]	0 [REDACTED] 1			ACTIVE	

14. Sample digitally signed (eSign) Licenses are shown below.



**Rajasthan Government
Medical & Health Department (DRUG CONTROL ORGANIZATION)**

FORM 20B
[See rule 61(1)]

Licence to sell, stock or exhibit or offer for sale, or distribute by wholesale other than those specified in Schedules C, C(1) and X

Licence No: [REDACTED]

Issue Date: [REDACTED]

- [REDACTED] is hereby licensed to sell, stock or exhibit or offer for sale, or distribute by wholesale drugs other than those specified in Schedules C, C (1) and X of the Drugs and Cosmetics Rules 1945, on the premises situated at [REDACTED] subject to the conditions specified below and to provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.
- The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics, Act, 1940 23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less than once in three years or as needed as per risk based approach
- Name (s) of qualified person (s) in charge [REDACTED]
- Qualified Person(s) Photographs



Note:

- Name of the Proprietors/ Directors/ Partners/ Manager of Co-Operative Society : [REDACTED]
- Carpet Area [REDACTED]
- Inclusive drugs required to be store between 2°C to 8°C temperature.
- NDPS Drugs: AS PER LICENSE
- The licence shall remain valid, if licensee deposits a licence retention fee before the expiry of a period of every succeeding five years from the date of issue.

Conditions of Licence

- This licence shall be displayed in a prominent place in a part of the premises open to the public.
- The licensee shall comply with the provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder for the time begin in force.
- i) No drug shall be sold unless such drug is purchased under a cash or credit memo from a duly licensed dealer or a duly licensed manufacturer.
ii) No sale of any drug shall be made to a person not holding the requisite licence to sell, stock or exhibit for sale, or distribute the drug. Provided that this condition shall not apply to the sale of any drug to-
a) an officer or authority purchasing on behalf of Government, or
b) a hospital, medical, educational or research institution or a registered medical practitioner for the purpose of supply to his patients, or
c) a manufacturer of beverages, confectionery biscuits and other non-medicinal products, where such drugs are required for processing these products.
- The licensee shall inform the Licensing Authority in writing in the event of any change in the constitution of the firm operating under the licence. Where any change in the constitution of the firm takes place, the current licence shall be deemed to be valid for a maximum period of three months from the date on which the change takes place unless, in the meantime, a fresh licence has been taken from the Licensing Authority in the name of the firm with the changed constitution.



Signature valid

Digitally Signed by Lalit Jaria
Designation : ASSISTANT DRUG
CONTROLLER
Date: 2021.02.03 11:54:31 IST
Reason: License Issued
Location: Jaipur

Note: This is a digitally signed license and does not required any physical signature. Also, this license can be validated using QR Code or online at <https://swcs.rajasthan.gov.in/DRUGSLICENSE/VerifyLicense.aspx>



**Rajasthan Government
Medical & Health Department (DRUG CONTROL ORGANIZATION)**

FORM 21B
[See rule 61(2)]

Licence to sell, stock or exhibit or offer for sale, or distribute by wholesale drugs specified in Schedules C and C (1) excluding those specified in Schedule X

Licence No: [REDACTED]

Issue Date: [REDACTED]

- [REDACTED] is hereby licensed to sell, stock or exhibit or offer for sale, or distribute by wholesale on the premises situated at [REDACTED] subject to the conditions specified below and to provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.
- Categories of drugs Specified in Schedules C and C(1) excluding those specified in Schedule X.
- The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics, Act, 1940 23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less than once in three years or as needed as per risk based approach
- Name (s) of qualified person (s) in charge [REDACTED]
- Qualified Person(s) Photographs



Note:

- Name of the Proprietors/ Directors/ Partners/ Manager of Co-Operative Society : [REDACTED]
- Carpet Area [REDACTED]
- Inclusive drugs required to be store between 2°C to 8°C temperature.
- NDPS Drugs: AS PER LICENSE
- The licence shall remain valid, if licensee deposits a licence retention fee before the expiry of a period of every succeeding five years from the date of issue.

Conditions of Licence

- This licence shall be displayed in a prominent place in a part of the premises open to the public.
- If the licensee wants to sell, stock or exhibit for sale or distribute during the currency of the licence additional categories of drugs listed in Schedules C and C (1) excluding those specified in Schedule X but not included in this licence, he should apply to the Licensing Authority for the necessary permission. This licence will be deemed to extend to the categories of drugs in respect of which such permission is given. This permission shall be endorsed on the licence by the Licensing Authority.
- i) No drug shall be sold unless such drug is purchased under a cash or credit memo from a duly licensed dealer or a duly licensed manufacturer.
ii) No sale of any drug shall be made to a person not holding the requisite licence to sell, stock or exhibit for sale, or distribute the drug. Provided that this condition shall not apply to the sale of any drug to:
a) an officer or authority purchasing on behalf of Government, or
b) a hospital, medical, educational or research institution or a registered medical practitioner for the purpose of supply to his patients, or
c) a manufacturer of hydrogenated vegetable oils, beverages, confectionery and other non-medicinal products, where such drugs are required for processing these products.
- The licensee shall inform the Licensing Authority in writing in the event of any change in the constitution of the firm operating under the licence. Where any change in the constitution of the firm takes place, the current licence shall be deemed to be valid for a maximum period of three months from the date on which the change takes place unless, in the meantime, a fresh licence has been taken from the Licensing Authority in the name of the firm with the changed constitution.



Signature valid

Digitally Signed by Lalit Jaria
Designation: ASSISTANT DRUG
CONTROLLER
Date: 2021.02.03 11:54:33 IST
Reason: License Issued
Location: Jaipur

Note: This is a digitally signed license and does not required any physical signature. Also, this license can be validated using QR Code or online at <https://swcs.rajasthan.gov.in/DRUGSLICENSE/VerifyLicense.aspx>

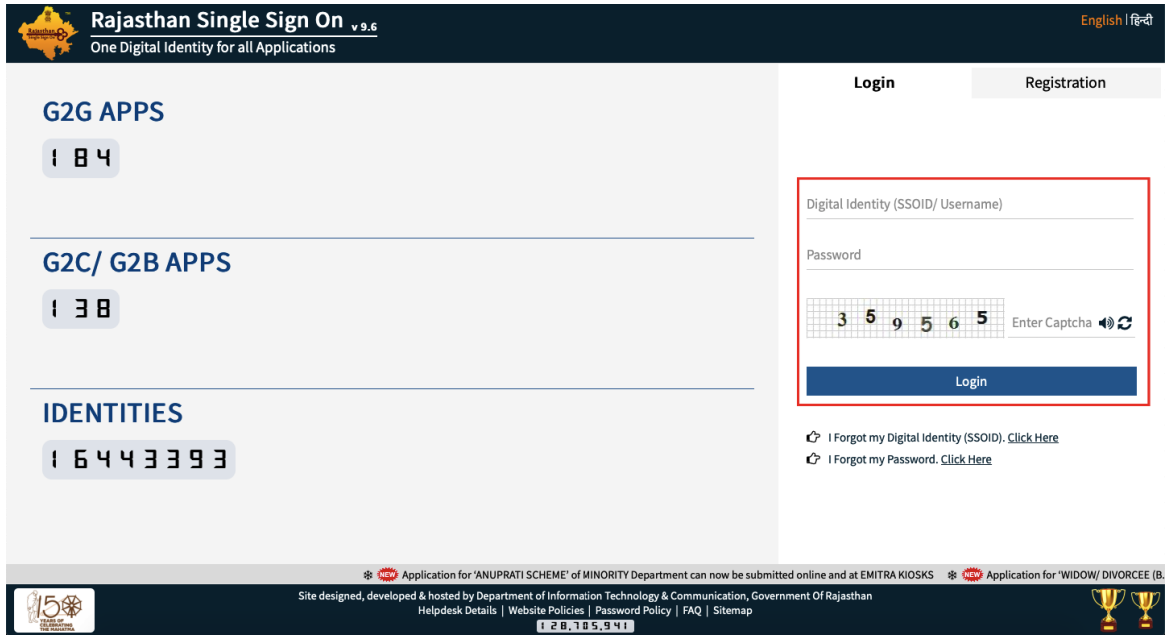
THANK YOU



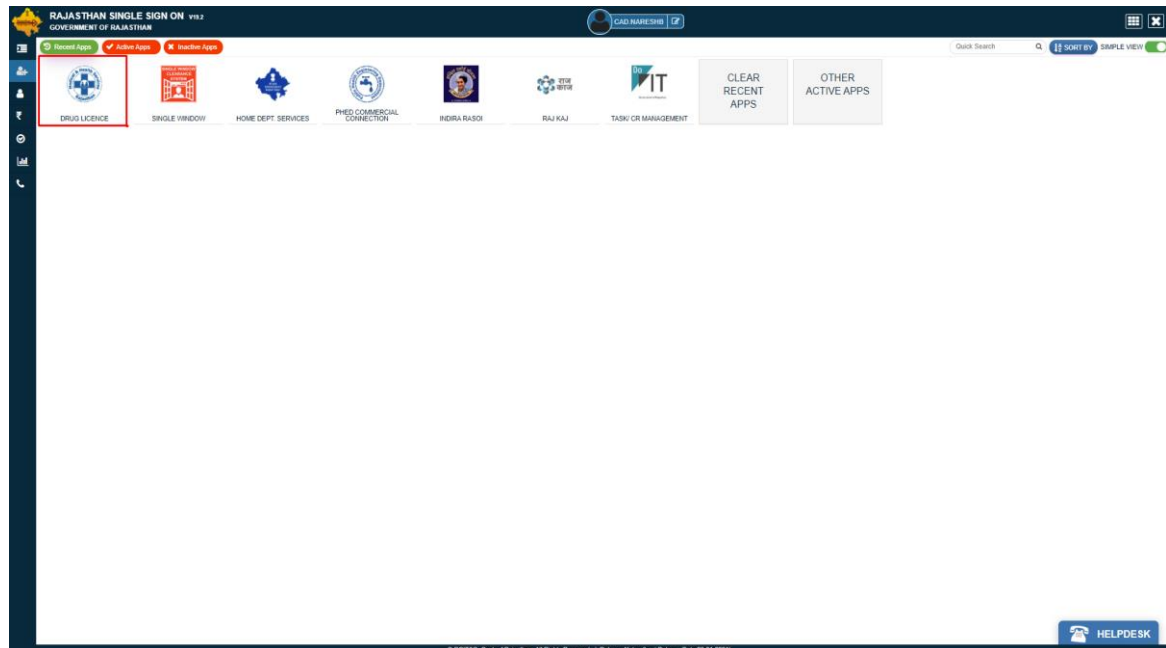
ONLINE APPLICATION DISPOSAL PROCEDURE

APPLICATION FOR LICENCE TO SELL, STOCK OR EXHIBIT OR OFFER FOR SALE, OR DISTRIBUTE OF DRUGS OTHER THAN THOSE SPECIFIED IN SCHEDULE-C, C(1), X FOR WHOLESALE (20B, 21B) (FORM-19)

- 1. A.D.C. (Additional Drug Controller) sign-in (login) to RajSSO (<https://sso.rajasthan.gov.in>) portal using his/ her SSOID as shown in figure below.



- 2. After successful sign-in (login), A.D.C. selects “DRUG LICENCE” from the available list of applications as shown in figure below.





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3. A.D.C. is presented with the “DEPARTMENT DASHBOARD” where all the applications which belong to his mapped districts would be listed along with their present status. A.D.C. clicks “VIEW” button to review the application and take the required action if any. Alternatively, there are filters available to filter the data as per status/ keywords.

Medical & Health Department Government of Rajasthan							JHULELAL
Department Dashboard							
Application Type :		Status :		Search...		Show Rows 10	
Show All		Select Status		Q			
S. No.	Application ID	Submission Date/ Time	Establishment Name	Type	District	Status	View
1	DRGAPP/2017-18/15	21/09/2017 20:21:53	ANNAPURNA AGENCY	FORM-19 - WHOLESALE	AJMER	LICENSE ISSUED BY ADC (26/09/2017 10:36:37)	
2	DRGAPP/2017-18/18	22/09/2017 12:14:23	AGARWAL MEDICAL AND GENERAL STORE	FORM-19 - RETAIL	JAIPUR	APPLICATION WITHDRAWN BY APPLICANT (26/09/2017 15:06:31)	
3	DRGAPP/2017-18/22	23/09/2017 13:22:32	JAIPUR AGENCIES	FORM-19 - WHOLESALE	JAIPUR	LICENSE ISSUED BY ADC (27/09/2017 18:45:52)	
4	DRGAPP/2017-18/3	19/09/2017 15:10:10	MADHAVA MEDICAL AND PROVISIONAL STORE	FORM-19 - RETAIL	SAWAI MADHOPUR	LICENSE ISSUED BY ADC (29/09/2017 14:10:08)	
5	DRGAPP/2017-18/27	25/09/2017 18:31:53	MS RAMDEV MADICAL AND GENRAL STORE	FORM-19 - RETAIL	HANUMANGARH	LICENSE ISSUED BY ADC (29/09/2017 15:06:44)	
6	DRGAPP/2017-18/13	20/09/2017 20:25:17	AASHUTOSH PHARMA	FORM-19 - WHOLESALE	BHILWARA	LICENSE ISSUED BY ADC (04/10/2017 15:40:15)	
7	DRGAPP/2017-18/39	03/10/2017 16:21:52	R N K R ENTERPRISES	FORM-19 - RETAIL & WHOLESALE	BHILWARA	LICENSE ISSUED BY ADC (05/10/2017 16:30:29)	
8	DRGAPP/2017-18/36	29/09/2017 17:12:42	HAYAT MEDICAL AND GENERAL STORE	FORM-19 - RETAIL	AJMER	LICENSE ISSUED BY ADC (06/10/2017 14:52:16)	
9	DRGAPP/2017-18/41	03/10/2017 17:47:27	KISHANGARH MEDICAL AGENCY	FORM-19 - WHOLESALE	AJMER	LICENSE ISSUED BY ADC (06/10/2017 15:27:02)	
10	DRGAPP/2017-18/95	09/10/2017 19:46:08	GUDIA AGENCY	FORM-19 - WHOLESALE	AJMER	LICENSE ISSUED BY ADC (10/10/2017 14:43:59)	

Showing - 1 to 10 of 32898 rows

First Previous 1 2 3 4 5 Next Last

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4. Application View page is presented to A.D.C where he have multiple actions available. Either he/ she can forward the application to D.C.O to conduct inspection or can initiate the inspection process on his self or he/ she can Issue the license if everything looks to him perfect and he/ she thinks inspection is not required at all for the said application. Other than these options, A.D.C can put an objection or reject the application if he/ she finds something not upto the mark. All these options are shown in below screen.

Medical & Health Department Government of Rajasthan				CAD.NARES...
Form-19 - Application for grant of a licence to sell, stock or exhibit or offer for sale, or distribute of drugs other than those specified in Schedule-C, C(1), X For Wholesale (20B, 21B)				
Application Details / आवेदन के बारे				
Application Type/ आवेदन का प्रकार	NEW APPLICATION	GST Number/ जी.एस.टी नंबर		
Registration No/ पंजीकरण क्रमांक	DRGAPP/2020-21/59888	Current Status/ वर्तमान स्थिति	PENDING WITH ADC	
Application Progress / आवेदन गतिविधि				
Sl. No.	Status	Remarks	Status Changed On	Updated By
1	NOT SUBMITTED	PENDING PAYMENT	17/01/2021 09:57:24	AVIJEET.VIJAY
2	PENDING WITH ADC	LICENSE FEES PAID BY APPLICANT	17/01/2021 09:59:12	AVIJEET.VIJAY



Establishment & Applicant(s) Details/ प्रतिष्ठान आवेदक (या आवेदकों) का विवरण

Establishment Type/ प्रतिष्ठान का प्रकार

PRIVATE LIMITED COMPANY

**Memorandum of Articles/
Constitution/ मेमोरेंडम ऑफ़
आर्टिकलस/ कौंस्टीट्यूशन**

[DOWNLOAD](#)

Applicants/ आवेदक

Sl. No./ क्र.सं	Aadhaar No/ आधार संख्या	Photo/ तस्वीर	Name/ नाम	Complete Address/ पूर्ण पता	Gender/ लिंग	DOB/ जन्म तिथि	PAN Card Number/ पेनकार्ड नंबर	MOBILE/ मोबाइल	E-Mail/ ई-मेल	Declaration/ घोषणा-पत्र
1	XXXXXXXX5438	[Redacted]	[Redacted]	[Redacted]	M	20/09/19	[Redacted]	[Redacted]	[Redacted]	View
2	XXXXXXXX4907	[Redacted]	[Redacted]	[Redacted]	F	01/01/11	[Redacted]	[Redacted]	[Redacted]	View
3	XXXXXXXX3001	[Redacted]	[Redacted]	[Redacted]	M	03/02/12	[Redacted]	[Redacted]	[Redacted]	View

Seller Details/ विक्रेता का विवरण

Seller Type/ विक्रेता का प्रकार

WHOLESALE

Registered Pharmacists Details/ पंजीकृत फार्मासिस्ट का विवरण

Sl. No./ क्र.सं	Aadhaar No/ आधार संख्या	Photo/ तस्वीर	Name/ नाम	Pharmacist Reg. No/ फार्मासिस्ट पंजीयन क्रमांक	Valid Upto/ मान्य दिनांक	Qualification/ योग्यता	PAN Card Number/ पेनकार्ड नंबर	MOBILE/ मोबाइल	E-Mail/ ई-मेल	Declaration/ घोषणा-पत्र	Signature/ हस्ताक्षर	Status/ स्थिति
1	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

Proposed Competent Person Details/ आवेदित सुयोग्य-जन विवरण

Sl. No./ क्र.सं	Aadhaar No/ आधार संख्या	Photo/ तस्वीर	Name/ नाम	Passing Year/ उत्तीर्ण वर्ष	Years of Experience/ अनुभव (वर्षों में)	Qualification/ योग्यता	PAN Card Number/ पेनकार्ड नंबर	MOBILE/ मोबाइल	E-Mail/ ई-मेल	Declaration/ घोषणा-पत्र	Signature/ हस्ताक्षर	Status/ स्थिति
1	[Redacted]	[Redacted]	RAMESH	[Redacted]	[Redacted]	HIGHER	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

Categories of drugs to be sold/ बेची जाने वाली दवाओं की श्रेणियों का विवरण

SPECIFIED IN SCHEDULES C AND C(1) EXCLUDING THOSE SPECIFIED IN SCHEDULE X, OTHER THAN THOSE SPECIFIED IN SCHEDULE C,C(1) AND X



DCO DEPARTMENT eSERVICES

Shop/ Premises Details/ दुकान/ भवन का विवरण

Urban/ Rural/ शहरी/ ग्रामीण		Shop/ Establishment Name/ दुकान/ संस्थान का नाम	
Shop/ Building Number/ दुकान/ भवन संख्या		Lane/ Street Name/ लेन/ गली/ सड़क	
Locality/ मोहल्ला		District/ ज़िला	
City/ शहर		Ward Number/ वार्ड संख्या	
PIN Code/ पिन कोड		State/ राज्य	
Mobile No./ मोबाइल नंबर		Email/ ई-मेल	
Police Thana/ पुलिस थाना		Shop Size (In Sq. Feet)/ दुकान का क्षेत्रफल (वर्ग फीट में)	
Shop Ownership/ दुकान का स्वामित्व	LEASE/ RENT	Rent Agreement And Rent Receipts/ किरायानामा एवं किराया रसीद	DOWNLOAD
Map/ नक्शा	DOWNLOAD	Form-19/ फॉर्म-19	DOWNLOAD

Refrigerator Details/ रेफ्रिजरेटर का विवरण

Capacity of Refrigerator (In Litres)/ रेफ्रिजरेटर की क्षमता (लीटर में)	190.00	Make/ Model of Refrigerator/ रेफ्रिजरेटर का मेक/ मोडल	HAIER
Refrigerator Purchase Voucher/ Declaration/ रेफ्रिजरेटर के खरीद की रसीद अथवा घोषणापत्र			DOWNLOAD

Payment Details/ भुगतान का विवरण

Licenses Fee/ लाइसेंस शुल्क	₹ 3,000.00	Payment Status/ भुगतान स्थिति	SUCCESS
Amount Paid/ भुगतान राशि	₹ 3,011.00	Payment Date/ भुगतान दिनांक	
Emitra Token/ ई-मित्रा टोकन		Bank Details/ बैंक विवरण	
Account Number/ खाता संख्या	2	Bank BID Number/ बैंक बी.आई.डी संख्या	

Declaration/ घोषणा

Do you have separate facility for storage of homeopathic medicines? Yes/ हाँ No/ नहीं

Following storage facilities are provided in shop:

- ✓ Racks/ Shelves
- ✓ General Hygeinic Conditions Satisfactory

Following arrangements have been made:

- ✓ Shop height is greater than 8 feet
- ✓ The Name of Firm Displayed On Upperside of Shutter With Paint Including Mobile Number/ Chemist And Drugist Mentioned For Retail Sale Shop
- ✓ For Keeping Expired Drugs With Display "Expired Drugs Not For Sale"
- ✓ For Storing Veterinary Drugs With Display "Veterinary Drugs Not For Human Use- Treatment Of Animals Only"

मैं/ हम एतद द्वारा घोषणा करता हूँ/ करते हैं कि ऊपर दिए गए समस्त विवरण मेरे/ हमारे ज्ञान एवं विश्वास के अनुसार पूर्णतः सत्य और सही है एवं उसमें कोई तथ्य छिपाया नहीं गया है। मैं/ हम उपरोक्त तथ्यों से भली भांति परिचित हूँ/ हैं की यदि मेरे/ हमारे द्वारा दी गयी सूचना गलत या असत्य पायी जाती है तो मैं/ हम कानूनी रूप से दंड का भागीदार होऊंगा/ होएँगे। साथ ही मेरे/ हमारे द्वारा प्राप्त की गयी सुविधाएं भी समाप्त मानी जाएगी।

DCO Allocation/ डी.सी.ओ निर्धारण

Assign D.C.O./ डी.सी.ओ निर्धारित करें*

SELECT DCO

Remarks For DCO(CHARACTERS LIMIT: 500)/ डी.सी.ओ हेतु टिप्पणी (अधिकतम शब्द सीमा 500)*

ENTER REMARKS

Forward To DCO

Object

Start Inspection

Reject

Close

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5. In application view page shown above, A.D.C have a dropdown in DCO Allocation, contains the list of D.C.O of application district to whom he/ she can forward application for inspection as shown in below image. Application Status is now Pending With DCO/ ADC (INSPECTION).

DCO Allocation/ डी.सी.ओ निर्धारण

Assign D.C.O/ डी.सी.ओ निर्धारित करें *

SELECT DCO

SELECT DCO

VISHNU KUMAR SHARMA (RJDA201213038909)

Remarks For DCO(CHARACTERS LIMIT: 500)/ डी.सी.ओ हेतु टिप्पणी (अधिकतम शब्द सीमा 500) *

ENTER REMARKS

Forward To DCO Object Start Inspection Reject Close

6. D.C.O. will login using his/ her SSOID and same department dashboard will be shown to him. If all OK, D.C.O. enters the required details as per applicable rules/ guidelines for license and finally clicks the "SUBMIT INSPECTION REPORT" button to send the application to the A.D.C for further processing. Application Status is now changed to PENDING WITH ADC (INSPECTION DONE)

Inspection Details/ Verification of Qualified Person/ Pharmacist/ निरीक्षण का विवरण/ सुयोग्य जन/ फार्मासिस्ट का सत्यापन

Verified Shop Size (In Sq. Feet)/ दुकान का सत्यापित क्षेत्रफल (वर्ग फीट में) *

ENTER ACTUAL SHOP SIZE

Verified Height of Shop/ दुकान की सत्यापित ऊँचाई (फीट में) *

ENTER ACTUAL HEIGHT OF SHOP

Is there any refrigerator available?/ क्या रेफ्रिजरेटर उपलब्ध है?

Yes/ हाँ No/ नहीं

NDPS & Schedule H, H1 Drugs (CHARACTERS LIMIT: 275)/ एन.डी.पी.एस. एवं शेड्यूल H, H1 ड्रग्स (अधिकतम शब्द सीमा 275)

ENTER DETAILS ABOUT NDPS & SCHEDULE H, H1 DRUGS

Remarks (CHARACTERS LIMIT: 500)/ टिप्पणी (अधिकतम शब्द सीमा 500) *

ENTER REMARKS

To operate pharmacy also?/ क्या फार्मसी का संचालन किया जाना प्रस्तावित है?

Yes/ हाँ No/ नहीं

Verified photographs of qualified person(s)/ क्या सुयोग्य जन/ फार्मासिस्ट के फोटोग्राफ सत्यापित हो गए हैं?

Yes/ हाँ No/ नहीं

Upload Verified Map/ सत्यापित नक्शा अपलोड करें *

Choose File NO FILE CHOSEN

Upload Inspection Report/ निरीक्षण रिपोर्ट अपलोड करें *

Choose File NO FILE CHOSEN

Inspection By/ निरीक्षणकर्ता का नाम *

INSPECTION BY

Inspection Date/ निरीक्षण दिनांक *

___/___/___

Submit Inspection Report Close



DCO DEPARTMENT eSERVICES

7. A.D.C. will login to SSO and open the same application view page as per described previously. Following inspection details and ISSUE LICENSE button will be presented as following screen. A.D.C can click on Issue License or resend application to D.C.O for reinspection or do inspection on its own and submit inspection report. He/ she can also object or reject application.

Inspection Details/ Verification of Qualified Person/ Pharmacist/ निरीक्षण का विवरण/ सुयोग्य जन/ फार्मासिस्ट का सत्यापन

Shop Inspection By MAHENDRA JUNWAL On 27-01-2021

Verified Size/ सत्यापित क्षेत्रफल	638.00 Sq. Feet	Verified Height/ सत्यापित ऊँचाई	8.00 Feet
Verified Capacity of Refrigerator/ रेफ्रिजरेटर की सत्यापित क्षमता	0.00 Litres	Verified Make/ Model of Refrigerator/ रेफ्रिजरेटर का सत्यापित मेक/ मोडल	NA
To operate pharmacy also?/ क्या फार्मसी का संचालन किया जाना प्रस्तावित है?	No/ नहीं	Verified photographs of qualified person(s)/ क्या सुयोग्य जन/ फार्मासिस्ट के फोटोग्राफ सत्यापित हो गए है?	Yes/ हाँ
Inspection Remarks/ निरीक्षण टिप्पणी	LICENCE MAY BE GRANTED	NDPS & Schedule H, H1 Drugs/ एन.डी.पी.एस. एवं शेड्यूल H, H1 ड्रग्स	AS PER RULES
Schedule-X Drugs/ शेड्यूल-X दवाओं का विवरण			
Verified Map/ सत्यापित नक्शा	DOWNLOAD	Inspection Report/ निरीक्षण रिपोर्ट	DOWNLOAD

DCO Allocation/ डी.सी.ओ निर्धारण

G. Inspection Details/ Verification of Qualified Person/ Pharmacist/ निरीक्षण का विवरण/ सुयोग्य जन/ फार्मासिस्ट का सत्यापन

[Forward To DCO](#) [Submit Inspection Report](#) [Objection](#) [Reject](#) [Issue License](#) [Close](#)

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8. On click of Issue License A.D.C. is re-directed to the AADHAAR VERIFICATION window as shown below wherein A.D.C. selects the first checkbox to give his/ her consent for AADHAAR VERIFICATION and then clicks the "SEND OTP" button to receive the OTP on his mobile number registered with AADHAAR. In Next screen A.D.C. enters the OTP sent on his mobile number registered with AADHAAR.

DCO Allocation/ डी.सी.ओ निर्धारण

Assign D.C.O/ डी.सी.ओ निर्धारित करें +
SELECT DCO

Remarks For DCO(CHARACTERS LIMIT: 500)/ डी.सी.ओ हेतु टिप्पणी (अधिकतम शब्द सीमा 500) +
ENTER REMARKS

G. Inspection Details/ Verificat

Verified Shop Size (In Sq. Feet)/ दुकान का सत्यापित आकार
ENTER ACTUAL SHOP SIZE

Is there any refrigerator available?/ क्या कोई रेफ्रिजरेटर उपलब्ध है?
 Yes/ हाँ No/ नहीं

NDPS & Schedule H, H1 Drugs (CHARACTERS LIMIT: 275)
 ENTER DETAILS ABOUT NDPS & SCHEDULE H, H1 DRUGS

To operate pharmacy also?/ क्या फार्मसी का संचालन करना है?
 Yes/ हाँ No/ नहीं

Upload Verified Map/ सत्यापित नक्शा अपलोड करें +
Choose File NO FILE CHOSEN

Upload Inspection Report/ निरीक्षण रिपोर्ट अपलोड करें +
Choose File NO FILE CHOSEN

XXXX-XXXX-4183 हिन्दी Eng

फिंगरप्रिंट

आईरिस

ओटीपी

मैं एतद्वारा घोषणा करता/ करती हूँ कि मुझे आधार आधारित प्रमाणीकरण प्रणाली के साथ अपने आप को प्रमाणित करने में कोई आपत्ति नहीं है और मैं आधार आधारित प्रमाणीकरण/ ईकेवाईसी के लिए अपने आधार संख्या, बायोमेट्रिक और/ या ओटीपी प्रदान करने के लिए सहमति देता/ देती हूँ। आधार सिस्टम से मोबाइल नंबर और ईमेल तक पहुंचने के लिए मैं अपनी स्पष्ट सहमति भी देता/ देती हूँ।

मेरे पास पहले से एक वैध आधार ओटीपी है।

ओटीपी भेजे रद्द करें v2.7.1

DCO Allocation/ डी.सी.ओ निर्धारण

Assign D.C.O/ डी.सी.ओ निर्धारित करें +
SELECT DCO

Remarks For DCO(CHARACTERS LIMIT: 500)/ डी.सी.ओ हेतु टिप्पणी (अधिकतम शब्द सीमा 500) +
ENTER REMARKS

G. Inspection Details/ Verificat

Verified Shop Size (In Sq. Feet)/ दुकान का सत्यापित आकार
ENTER ACTUAL SHOP SIZE

Is there any refrigerator available?/ क्या कोई रेफ्रिजरेटर उपलब्ध है?
 Yes/ हाँ No/ नहीं

NDPS & Schedule H, H1 Drugs (CHARACTERS LIMIT: 275)
 ENTER DETAILS ABOUT NDPS & SCHEDULE H, H1 DRUGS

To operate pharmacy also?/ क्या फार्मसी का संचालन करना है?
 Yes/ हाँ No/ नहीं

Upload Verified Map/ सत्यापित नक्शा अपलोड करें +
Choose File NO FILE CHOSEN

Upload Inspection Report/ निरीक्षण रिपोर्ट अपलोड करें +
Choose File NO FILE CHOSEN

XXXX-XXXX-4183 हिन्दी Eng

फिंगरप्रिंट

आईरिस

ओटीपी

मैं एतद्वारा घोषणा करता/ करती हूँ कि मुझे आधार आधारित प्रमाणीकरण प्रणाली के साथ अपने आप को प्रमाणित करने में कोई आपत्ति नहीं है और मैं आधार आधारित प्रमाणीकरण/ ईकेवाईसी के लिए अपने आधार संख्या, बायोमेट्रिक और/ या ओटीपी प्रदान करने के लिए सहमति देता/ देती हूँ। आधार सिस्टम से मोबाइल नंबर और ईमेल तक पहुंचने के लिए मैं अपनी स्पष्ट सहमति भी देता/ देती हूँ।

ओटीपी (वन टाइम पासवर्ड)

नोट: आधार ओटीपी केवल 10 मिनट के लिए वैध होगा।

ओटीपी मान्य करें रद्द करें v2.7.1

9. After successful AADHAAR VERIFICATION, digitally signed (eSign) Licenses are generated by the system. Application Status is now changed to LICENSE ISSUED BY ADC. Licenses can be downloaded from the License Details section on view page as highlighted below.

License Details/ लाइसेंस का विवरण

Sl. No./ क्र.सं.	License Form/ लाइसेंस फॉर्म	License Number/ लाइसेंस नंबर	Issued On/ जारी दिनांक	Valid Upto/ मान्य दिनांक	Renewed/ Retained Upto/ दिनांक तक नवीनीकरण	Status/ वर्तमान स्थिति	Download
1	FORM 20B	XXXXXXXXXXXX	01/01/2020	01/01/2021		ACTIVE	
2	FORM 21B	XXXXXXXXXXXX	01/01/2020	01/01/2021		ACTIVE	

10. Sample digitally signed (eSign) Licenses are shown below.



**Rajasthan Government
Medical & Health Department (DRUG CONTROL ORGANIZATION)**

FORM 20B
[See rule 61(1)]

Licence to sell, stock or exhibit or offer for sale, or distribute by wholesale other than those specified in Schedules C, C(1) and X

Licence No: [REDACTED]

Issue Date: [REDACTED]

- [REDACTED] is hereby licensed to sell, stock or exhibit or offer for sale, or distribute by wholesale drugs other than those specified in Schedules C, C (1) and X of the Drugs and Cosmetics Rules 1945, on the premises situated at [REDACTED] subject to the conditions specified below and to provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.
- The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics, Act, 1940 23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less than once in three years or as needed as per risk based approach
- Name (s) of qualified person (s) in charge [REDACTED]
- Qualified Person(s) Photographs



Note:

- Name of the Proprietors/ Directors/ Partners/ Manager of Co-Operative Society : [REDACTED]
- Carpet Area [REDACTED]
- Inclusive drugs required to be store between 2°C to 8°C temperature.
- NDPS Drugs: AS PER LICENSE
- The licence shall remain valid, if licensee deposits a licence retention fee before the expiry of a period of every succeeding five years from the date of issue.

Conditions of Licence

- This licence shall be displayed in a prominent place in a part of the premises open to the public.
- The licensee shall comply with the provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder for the time begin in force.
- i) No drug shall be sold unless such drug is purchased under a cash or credit memo from a duly licensed dealer or a duly licensed manufacturer.
ii) No sale of any drug shall be made to a person not holding the requisite licence to sell, stock or exhibit for sale, or distribute the drug. Provided that this condition shall not apply to the sale of any drug to-
a) an officer or authority purchasing on behalf of Government, or
b) a hospital, medical, educational or research institution or a registered medical practitioner for the purpose of supply to his patients, or
c) a manufacturer of beverages, confectionery biscuits and other non-medicinal products, where such drugs are required for processing these products.
- The licensee shall inform the Licensing Authority in writing in the event of any change in the constitution of the firm operating under the licence. Where any change in the constitution of the firm takes place, the current licence shall be deemed to be valid for a maximum period of three months from the date on which the change takes place unless, in the meantime, a fresh licence has been taken from the Licensing Authority in the name of the firm with the changed constitution.



Signature valid

Digitally Signed by Lalit Jaria
Designation : ASSISTANT DRUG
CONTROLLER
Date: 2021.02.03 11:54:31 IST
Reason: License Issued
Location: Jaipur

Note: This is a digitally signed license and does not required any physical signature. Also, this license can be validated using QR Code or online at <https://swcs.rajasthan.gov.in/DRUGSLICENSE/VerifyLicense.aspx>



**Rajasthan Government
Medical & Health Department (DRUG CONTROL ORGANIZATION)**

FORM 21B
[See rule 61(2)]

Licence to sell, stock or exhibit or offer for sale, or distribute by wholesale drugs specified in Schedules C and C (1) excluding those specified in Schedule X

Licence No: [REDACTED] Issue Date: [REDACTED]

- [REDACTED] is hereby licensed to sell, stock or exhibit or offer for sale, or distribute by wholesale on the premises situated at [REDACTED] subject to the conditions specified below and to provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.
- Categories of drugs Specified in Schedules C and C(1) excluding those specified in Schedule X.
- The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics, Act, 1940 23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less than once in three years or as needed as per risk based approach
- Name (s) of qualified person (s) in charge [REDACTED]
- Qualified Person(s) Photographs



- Note:**
- Name of the Proprietors/ Directors/ Partners/ Manager of Co-Operative Society : [REDACTED]
- Carpet Area [REDACTED]
- Inclusive drugs required to be store between 2°C to 8°C temperature.
- NDPS Drugs: AS PER LICENSE
- The licence shall remain valid, if licensee deposits a licence retention fee before the expiry of a period of every succeeding five years from the date of issue.

Conditions of Licence

- This licence shall be displayed in a prominent place in a part of the premises open to the public.
- If the licensee wants to sell, stock or exhibit for sale or distribute during the currency of the licence additional categories of drugs listed in Schedules C and C (1) excluding those specified in Schedule X but not included in this licence, he should apply to the Licensing Authority for the necessary permission. This licence will be deemed to extend to the categories of drugs in respect of which such permission is given. This permission shall be endorsed on the licence by the Licensing Authority.
- i) No drug shall be sold unless such drug is purchased under a cash or credit memo from a duly licensed dealer or a duly licensed manufacturer.
ii) No sale of any drug shall be made to a person not holding the requisite licence to sell, stock or exhibit for sale, or distribute the drug. Provided that this condition shall not apply to the sale of any drug to-
a) an officer or authority purchasing on behalf of Government, or
b) a hospital, medical, educational or research institution or a registered medical practitioner for the purpose of supply to his patients, or
c) a manufacturer of hydrogenated vegetable oils, beverages, confectionery and other non-medicinal products, where such drugs are required for processing these products.
- The licensee shall inform the Licensing Authority in writing in the event of any change in the constitution of the firm operating under the licence. Where any change in the constitution of the firm takes place, the current licence shall be deemed to be valid for a maximum period of three months from the date on which the change takes place unless, in the meantime, a fresh licence has been taken from the Licensing Authority in the name of the firm with the changed constitution.



Signature valid

Digitally Signed by Lalit Jaria
Designation: ASSISTANT DRUG
CONTROLLER
Date: 2021.02.09 17:54:33 IST
Reason: License Issued
Location: Jaipur

Note: This is a digitally signed license and does not required any physical signature. Also, this license can be validated using QR Code or online at <https://swcs.rajasthan.gov.in/DRUGSLICENSE/VerifyLicense.aspx>

THANK YOU