

PRODUCT CERIFICATION DOCUMENT

ALCOHOL-BASED HAND SANITISERS IMPORT APPLICATION FORM

Document No: PRC-P08-01-FA Page 1 of 3

Version: 03

Effective: November 2020

Compiled by: NSI Certification Approved by: GM-Certification

REFERENCE NUMBER	CPIR NO:	0 0	0 /	Y	Y	Y	Y	
Please ensure that before completing this application form you are familiar with the content of the Alcohol-based hand sanitisers regulations and the Registration and Approval Procedure. The application form must be accompanied by a non-refundable application fee of N\$ 580.00 (excluding VAT).								
Note: No application will be processed before payment of the applicable fees.								
This form should be completed in full and returned to: Namibian Standards Institution (NSI) Tel: +264 61 386400 Fax: +264 61 386454 P.O. Box 26364 Windhoek, Namibia Channel Life Tower, M1, Post Street Mall, Windhoek, Namibia PART I: TO BE COMPLETED BY THE IMPORTER								
Importer's Name:	Date of ap	plication:						
Business Registration No:	Business	siness Physical Address:						
Business Postal Address:	Town:							
Telephone Number: ()	Email Add	Address:						
Fax Number: ()	Contact P	erson & Pos	ition held	d:				
PART II: MANUFACTURER DETAILS								
Manufacturer's Name:	Business	Physical Add	dress:					
Business Registration No:	Town:							
Business Postal Address:	Country:							
Telephone Number: ()	Email Add	Email Address:						
Fax Number: ()	Contact P	erson & Pos	ition held	d:				
PART III: PRODUCT DESCRIPTION AND SPECIFICATION:								
Product Brand Name:								
Number of products:								
Date of manufacture:								
Product Shelf-life:								
Standard used in the manufacturing of the hand sanitisers: (attach certificate of registration)								
Alcohol based hand sanitiser type (liquid/gel):		esent (ethan		opanol):				
Nominal volume or mass of packages		·						



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PART IV: TRANSPORTATION DETAILS:							
Point of entry in Namibia:							
*Country of origin	Destination						
Mode of transportation	Route of import						
Air	Courte A.						
Dood	Country A:						
Road							
Rail	Country B;						
Sea	Country C:						
Other (specify)							
Storage premises in Namibia (Physical address):							
Storage promises in Namisia (1 hysical address).							
Durance of importation, Commonweight / Donation / Donation / Other (or							
Purpose of importation: Commercial / Donation / Domestic / Other (spe	ecity):						
Commercial purposes:(tick as appropriate):							
Deadust sold in its spinisel sockers							
Product sold in its original package Product repackaged in smaller containers under the same bra	and name						
Product repackaged in smaller containers under a different bra							
Following Documents are attached (cross where applicable):							
Bill of Landing / Invoice / Order sheet							
Product Material Safety Data Sheet (MSDS)							
Certificate of Conformity (CoC)/ Permit /Mark of Conformity							
Product Label							
Certificate of Analysis (COA) / Test report Certificate of analysis and Test report should not be older than two months							
Declaration:							
I / We							
being the agent / principal of							
by me/us herein are true and complete and I / We accept to comply fully with the conditions and requirements for certification of imported alcohol based							
hand sanitiser products.							
Signed on this day of							
Signature of applicant:							
Capacity:							



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PART V	: EVALUATION - FOR OFFICIAL USE ONLY							
Paymen	t Details:							
a)	Application fee: N\$.	Date:	Receipt No:					
I have examined the application based on the following criteria: YES / NO / N/A								
1.	Product manufacturing date:							
2.	-							
3.	• •							
4.	•							
5.	•							
6.	·							
7.	, , ,							
8.	-							
9.								
10.	Additional Documents:							
	a)							
	c)							
	,							
Applicati	on forwarded for Approval / Rejection (state reason(s) f	• '						
Applicati	on referred back to applicant (state reason(s)):							
I hereby	declare that no conflict of interest or any other situ	ation known to me exists	that could have a negative effect on decision that will be					
	myself during the review of this application.							
Name:		Title:						
0'		Data						
Signed:		Date:						
We hereby declare that no conflict of interest or any other situation known to us exists that could have a negative effect on decision that will								
be taker	by ourselves during the review of the assessment	of this application.						
Reviewe	ed for Approval / Rejection:							
		Date:						
Manage	r – Certification, NSI							
		Date:						
General	Manager – Certification, NSI							
	cecutive Officer, NSI	Date:						