PAYMENT FORM FOR THE
TARIFF FOR MARKETING AUTHORISATION
ACCORDING TO ARTICLE 893 OF LAW NO.
95/2006 AND THE TARIFF FOR THE
ASSESSMENT OF DOCUMENTATION IN VIEW
OF MARKETING AUTHORISATION RENEWAL
ACCORDING TO MINISTER OF HEALTH
ORDER NO. 888/2014
FOR MEDICINAL PRODUCTS AUTHORISED
THROUGH MUTUAL RECOGNITION OR
DECENTRALISED PROCEDURE WITH ROMANIA
AS CONCERNED MEMBER STATE

| Name of the medicinal product: | | | | | | |
|---|----------------|-----|--|--|--|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Pharmaceutical form, strength, administration route | | | | | | |
| Diameter Code | | | | | | |
| Pharmaceutical form: | | | | | | |
| Strength: | | | | | | |
| Administration route: | | | | | | |
| | | | | | | |
| Marketing Autho | orisation Hold | der | | | | |
| | | | | | | |
| Name: | | | | | | |
| Address: | | | | | | |
| City: | | | | | | |
| Country: | | | | | | |
| Telephone no.: | | | | | | |
| Fax no.: | | | | | | |
| E-mail address: | | | | | | |

| Status of the medicinal product | | | | |
|---------------------------------|-----------------------|--|--|--|
| Marketing | | | | |
| authorisation renewal | | | | |
| | | | | |
| Type of the au | thorisation procedure | | | |
| | | | | |
| Mutual | | | | |
| recognition | | | | |
| procedure | | | | |
| Decentralised | | | | |
| procedure | | | | |
| | | | | |
| Paying compa | ny | | | |
| Name: | | | | |
| Address: | | | | |
| City: | | | | |
| Country: | | | | |
| Telephone no.: | | | | |
| Fax no.: | | | | |
| E-mail address: | | | | |
| Fiscal Code: | | | | |
| Trade Registry | no.: | | | |
| IBAN Account n | 0.: | | | |
| Bank: | | | | |
| | | | | |
| Proposed form of payment | | | | |
| | | | | |
| Lei: | | | | |
| Euro: | | | | |
| | | | | |

Tariff for marketing authorisation according to Article 893 of Law no. 95/2006 on healthcare reform, as republished, with the further amendments

| F | | | | 1 | | | | |
|---|--|---------|---------|-----------|--|--|--|--|
| | edicinal products ment on healthcare reform = | | | | | | | |
| | | | | • | | | | |
| Tariff for assessment of documentation in view of marketing authorisation renewal through European procedures | | | | | | | | |
| Activity | | | | | The fee in euro currency according to the MHO no. 888/2014*) | | | |
| Marketing authorisation renewal for medicinal products through mutual recognition procedure or decentralised procedure with Romania as Concerned Member State | | | | | | | | |
| *) The applicant will fill in the fee in euro currency | | | | | | | | |
| Date of application | on submission (Appl | licant, | NAM | MDR) | | | | |
| Representative to Romania/Contact person | | | | | | | | |
| Name: | | | | | | | | |
| Address: | | | | | | | | |
| City: | | | | | | | | |
| Country: | | | | | | | | |
| Telephone no.: | | | | | | | | |
| Fax no.: | | | | | | | | |
| E-mail address: | | | | | | | | |
| Fiscal Code: | | | | | | | | |
| | ne responsability for a | ccurad | cy of d | lata in t | he present form. | | | |

Marketing Authorisation Holder/Representative to Romania Name, signature, stamp