

**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 REFERENCE MEMBER STATE**

**Name of the medicinal product:**

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**Pharmaceutical form, strength, administration route**

Pharmaceutical form:	
Strength:	
Administration route:	

**Marketing Authorisation Holder**

Name:	
Address:	
City:	
Country:	
Telephone no.:	
Fax no.:	
E-mail address:	

**Status of the medicinal product**Marketing  
authorisation  
renewal**Type of the authorisation procedure**Mutual  
recognition  
procedureDecentralised  
procedure**Paying company**

Name:	
Address:	
City:	
Country:	
Telephone no.:	
Fax no.:	
E-mail address:	
Fiscal Code:	
Trade Registry no.:	
IBAN Account no.:	
Bank:	

**Proposed form of payment**

Lei :	<input type="checkbox"/>
Euro :	<input type="checkbox"/>

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

For all types of medicinal products mentioned by Law no. 95/2006 on healthcare reform = 5000 €	<input type="checkbox"/>
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**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 Reference Member State according to Order No. 888/2014, Annex III, letter. B, point 27.a)	<input type="checkbox"/>	

\*) The applicant will fill in the fee in euro currency

**Date of application submission (Applicant, NAMMDR)**


**Representative to Romania/Contact person**

Name:	
Address:	
City:	
Country:	
Telephone no.:	
Fax no.:	
E-mail address:	
Fiscal Code:	

Signatories assume responsibility for accuracy of data in the present form.

Date.....

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