

**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 PROPOSED FOR
AUTHORISATION THROUGH
NATIONAL PROCEDURE**

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 productRenewal **Type of authorisation renewal procedure**National 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 paymentLei: Euro: **Tariff for marketing authorisation renewal 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 €

Activity		The fee in euro currency according to the MHO no. 888/2014 ^{*)}
1. Marketing authorisation renewal conform Article 730(2) of Law 95/2006, with further amendments and additions, or Article 24 (2) of Directive 2001/83 EC (national procedure)	<input type="checkbox"/>	
2. Marketing authorisation renewal of homeopathic medicinal products submitted according to Article 710 of Law 95/2006, with further amendments and additions, (Marketing authorisation through simplified procedure) - (national procedure)	<input type="checkbox"/>	
3. Marketing authorisation renewal a of traditional herbal medicinal products granted according to Article 714 of Law 95/2006, with further amendments and additions (national procedure)	<input type="checkbox"/>	

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

Date of application submission (Proposer, NMA)

Representative to Romania/Contact person

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

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

Date.....

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