



IN-VITRO DIAGNOSTICS CONTROL LABORATORY

COMPANY REGISTRATION FORM

(MLSCN/IVDs/181)

Ver.2

MANUFACTURER / IMPORTER

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MLSCN Internal Use Only		
Application Number:		
Company identifier number:		
Company name:		
Date received at IVD Lab:		

1. Company Information

1.1. Company

1.1.1. Name of Company	
1.1.2. MLSCN Company identification number	
Communication address	Street Name and No.:
Company Physical address	City:
	Postcode:
	Country:
112 Company Postal address	Street Name and No.:
1.1.3. Company Postal address	Postal Office Box No.:
	City:
	Postcode:
	Country:
1.1.4. Company telephone	
1.1.5. Company fax	
1.1.6. Company email	
1.1.7. Company URL/web address	
1.1.8. Name of parent company	
1.1.9. List of Directors	
1.1.10.	
1.1.11.	
1.1.12.	
1.1.13.	

1.2. Authorized contacts for the Company

1.2.1. Name	of key authorized contact	
1.2.2. Authorized contact postal address		Department:
	,	Street Name and No.:
		City:
		Postcode:
		Country:
1.2.3. Authorized contact telephone	ri-od contract tolonbourg	Fixed line:
	rizea contact telephone	Mobile/Cell phone:
1.2.4. Author	rized contact fax	
1.2.5. Autho	rized contact email	

1.2.6. Name of second authorized contact	
1.2.7 Authorized contract postel	Department:
1.2.7. Authorized contact postal address	Street Name and No.:
	City:
	Postcode:
	Country:
1.2.9 Authorized contact talenhone	Fixed line:
1.2.8. Authorized contact telephone	Mobile/Cell phone:
1.2.9. Authorized contact fax	
1.2.10. Authorized contact email	
1.2.11. Other Locations in-country	

2. Product – Information – List of IVDs Marketed in Nigeria

Serial no.	Product name	Catalogue number
2.1.1.		
2.1.2.		
2.1.3.		
2.1.4.		
2.1.5.		
2.1.6.		

2.1. Product name and product/catalogue number

(Use of extra sheets is allowed)

- 3.1 Manufacturer / Importer Enlistment Fee N50,000=
- 3.2 Marketers Enlistment Fee N30,000=

Pay to TSA via Remita platform (www.mlscn.org.ng):

Return Completed Form and Remita printout from the Bank to:

Head of Public Health IVDs Control Laboratory MLSCN Lagos Office 8 Harvey Road Yaba Lagos

www.mlscn.gov.ng ivds@mlscn.gov.ng +234-8086662392 +234-8056015503