



# IN-VITRO DIAGNOSTICS CONTROL LABORATORY

### COMPANY REGISTRATION FORM

## (MLSCN/IVDs/181)

Ver.2

MANUFACTURER / IMPORTER

-				
N	1AF	SKI	FT	FR
	.,			

_		

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