

EUROPEAN COMMISSION HEALTH AND FOOD SAFETY DIRECTORATE-GENERAL

Health systems, medical products and innovation **Medical products: quality, safety, innovation**



Request form for the exchange of information on marketing authorisation holders or manufacturing authorisation holders between the competent authorities in the EEA

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1. Union format for a request form for the exchange of information on marketing authorisation holders or manufacturing authorisation holders between the competent authorities in the EEA

Title	Request form for the exchange of information on marketing authorisation holders or manufacturing authorisation holders between the competent authorities in the EEA
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The templates below were developed in order to facilitate exchange of information between the competent authorities in EEA where there are no established procedures or systems (e.g. EudraGMDP) for the exchange of information

Reference no.:	No. of pages/No. of attachments:	Date:
equesting Competent Autho	ority	
Competent Authority/ Countr	у	
Address/phone/fax		
Contact Person		
Email of Contact Person		
	,	
ecipient Competent Authori	ty	
Competent Authority/ Countr	у	
Address/phone/fax		
Contact Person		
Email of Contact Person		
equest for Exchange of Info	ormation on [complete as appropriate]	
MAH - Address/phone/fax/Em	ail	
QPPV/ PSMF site – Address/p	hone	
Medicinal Product/dosage		
form/strength/INN/MA		
Manufacturer -		
Manufacturer - Address/phone/fax/Email Information requested		

Reply form in response to a request for the exchange of information on marketing authorisation holders or manufacturing authorisation holders between the competent authorities in the EEA

As requested by the competent authority of	on/	/
the competent authority ofconfirms the following information:		
The MAH and/ or QPPV/PSMF or the Manufacturer (delete as appropriate)		
(Medicinal Product/dosage form/strength/INN/MA)		
Address		
Name and signature of a responsible officer of the reporting competent authority:		
	Data	