

**REQUIREMENT / PROCEDURE FOR
DUPLICATE CATEGORY A OR B (CATEGORY LOST CASES)**

Requirements of Duplicate Category A or B (Category Lost Cases)

1. Application for Duplicate Category with reasons
2. Original F.I.R. / Police Report (reported in last 90 days before application to Punjab Pharmacy Council) of loss of Original or duplicate issued category with category registration No. issued by Punjab Pharmacy Council
3. Original News Paper Advertisement of loss of Original or duplicate issued category with category registration No. issued by Punjab Pharmacy Council
4. **Two (2)** colored photocopies of CNIC.
5. **Two (2)** photocopies of the Category (if available)
6. **Four (4)** Photograph Passport size
7. **Three (3)** specimen signatures duly attested
8. An affidavit attested from Oath Commissioner / Notary Public/ Magistrate 1st Class on Non–Judicial paper of Rs. 100/- indicating specimen overleaf.
9. Pay Order / Demand Draft for issuance of **Duplicate Certificate** Fee in the name of Secretary, Punjab Pharmacy Council of Rs. 5000/- **or** Duplicate Certificate issuance Fee may be submitted in the office of Punjab Pharmacy Council personally.
10. Original Registration File (if available)
11. Personal Appearance in Punjab Pharmacy Council / Appearance certificate from Area Drug Inspector (if necessary).

AFFIDAVIT

(FOR DUPLICATE CATEGORY A OR B (CATEGORY LOST CASES))

I, _____ S/D/o _CNIC No. ____ Caste
_____ Resident of _____
Tehsil _____ District _____ do hereby solemnly
affirm and declare as under:-

1. I am applying for duplicate registration certificate from Punjab Pharmacy Council.
2. That my original / already issued duplicate Certificate of Registration is lost and a police report has been issued in this regards bearing No. _____ dated _____ . The advertisement was also issued in Daily News Paper _____ Dated _____ .
3. I certify that I am not applying for the duplicate category issuance in Punjab Pharmacy Council due to dispute with the proprietor or such related issues.
4. In case my Original Certificate of registration is found, I will return the Original Certificate of registration in Punjab Pharmacy Council.
5. That I have never been declared unsound mind by any Court of Law.
6. That in case of false information Punjab Pharmacy Council may take action against me as per law.
7. That as stated above is true to the best of my knowledge and belief.

DEPONENT

VERIFICATION

Verified on oath this _____ Day of _____ at _____
_____ That the contents of this affidavit are true to the best of my
Knowledge and belief and nothing have been concealed.

DEPONENT