

Form MD-19
[See sub-rule (2) of rule 42]

Licence to import investigational medical device by a government hospital or statutory medical institution for the treatment of patients

Licence No. _____

1. Dr _____ (Name and designation) of _____ (Name of Hospital or Statutory Medical Institution) here by grant licence to import from M/s..... (Name and full address of manufacturer) the medical devices specified below for the purpose of treatment of patients for the disease _____ (name of the disease) at (name and address of the hospital).

2. Details of medical device to be imported:

Name of medical device	Quantities which may be imported

3. This licence shall, unless previously suspended or revoked, be in force for a period of one year from the date of issue specified above.

Place: _____

Date: _____

Central Licensing Authority
Seal or Stamp