



**APPLICATION FORM FOR REGISTRATION OF  
PREPACKAGED FOOD**  
(Under Section No. 26(2) of the Zanzibar Food, Drugs and  
Cosmetics Act, 2006)

**ZFDA/FSCD/AFM/009**  
Rev. # 3

Date: ..... Application Number (for official use only) .....

<i>New</i>		<i>Renew</i>		<i>Retention</i>				(year)
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**1. Particulars of product:**

- 1.1 Brand Name: .....
- 1.2 Common Name: .....
- 1.3 Product form (Solid, Liquid, etc.) .....
- 1.4 Intended use: .....
- 1.5 Target User: .....
- 1.6 Type of packaging material and seals: .....
- 1.7 Packaging unit: .....
- 1.8 Shelf life: .....
- 1.9 Shelf life (after first opening of container) .....
- 1.10 Shelf life (after reconstitution, where applicable) .....
- 1.11 Recommended storage conditions: .....

**2. Particulars of Applicant**

- Name: .....
- Physical Address: .....
- Postal Address: .....
- Telephone: ..... Fax: .....
- Email: .....

**3. Particulars of a resident responsible person (for foods to be imported only)**

- Name: .....
- Physical Address: .....
- Postal address .....
- Phone: ..... Fax: .....
- Email: .....

*(Certified copy of Power of attorney or formal agreement or any other official Authorization of the Resident Responsible Person to be enclosed)*

**4. Manufacturer and qualified person for manufacture of the product**

**a. Manufacturer**

- Name: .....
- Physical Address: .....
- Postal Address: .....
- Phone: ..... Fax: .....



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Email: .....

**b. Qualified person:**  
Name: .....  
Qualification: .....  
.....  
Address: .....  
Phone: ..... Fax: .....  
Email: .....

*(Please enclose copies of certified documents)*

5. **Status of registration of the product in the country of origin, authorization/registration number and date** *(where applicable and for foods to be imported only)*.  
.....

6. **Nutritional information of the product.**  
.....  
.....  
.....

**7. Ingredients used**

**A. Typical food ingredients**

SN.	Name	Proportion (% or Ratio)	Purpose

**B. Food Additives**

SN.	Chemical/scientific name	Level	Purpose

*Note: With this application form, submit your product sample as it is described in Guidelines for registration of Pre-packaged food.*



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**8. Declarations by an applicant**

1. I, the undersigned do hereby certify that all the information in this form and all the accompanying documentations is correct. I further confirm that the information referred to in my application file is available for verification.
2. I also agreed that I am obliged to comply with Zanzibar Food, Drugs and Cosmetics Act No. 2, 2006 requirements related to pre-packaged food.

**Name:** .....

**Position in the Company:** .....

**Signature and official stamp:** ..... **Date:** .....

**FOR OFFICIAL USE ONLY**

Fees ..... Receipt No. .... of .....

Licence granted/not granted because ..... Licence No. ....

Approved by Technical Committee Meeting No. ....of .....

.....  
**Date** ..... **Responsible Registration Officer** ..... **Signature** .....

.....  
**Date** ..... **Signature of Executive Director and stamp** .....