USER OPERATIONAL GUIDE

E-Vesoj

Prepared for the Health & Family Welfare Department,
Government of West Bengal

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1. Introduction

1.1 Purpose of this manual

This manual is designed to provide you with an understanding of the E-Vesoj System Software. The manual lists the various features and functions that are available whilst assisting you in carrying out each task with step by step instructions and guidance. Visual screens are captured to improve clarity and understanding of a function.

1.2 Who should use this manual

This manual is intended User of medicine shops.

1.3 Prerequisites

Users should have a basic understanding of using a computer, keyboard and mouse. In addition, being able to understand basic functions of a web browser will be beneficial as well as elements such as pop-up windows. In some cases, more than one web page may be open; User should have knowledge of using and navigating to a different 'Tab' when required. Many of the terms and functions however are common across the Software including buttons such as 'Submit', 'Edit', 'Update' and 'View'.

1.4 Structure of this manual

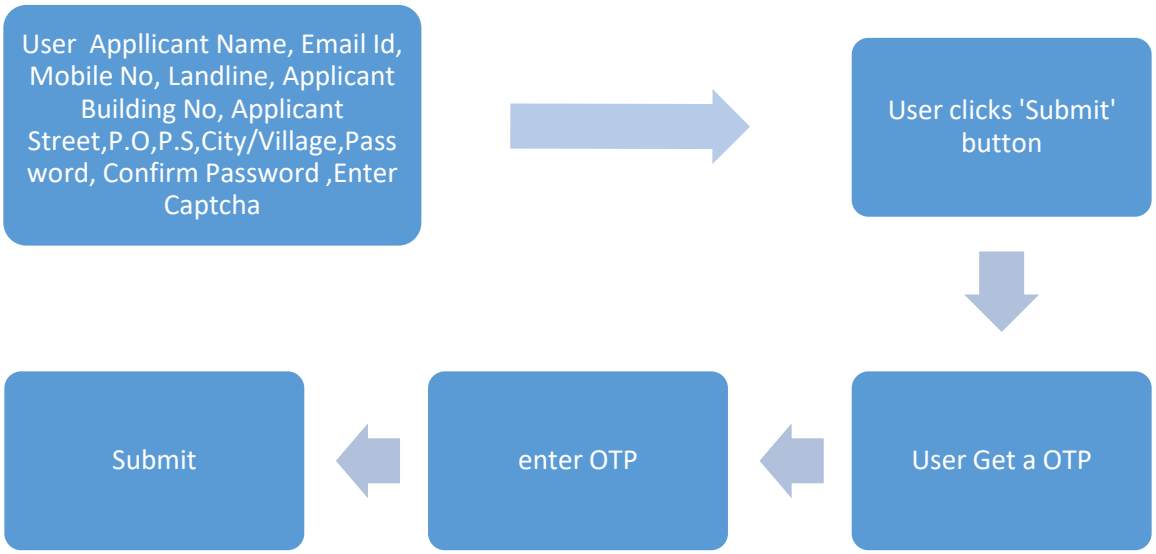
This manual will be organized in line with the Software menu screen and in the same hierarchical structure. Chapters within this manual are sequenced in the same order as the main menu headings and have the precise title names as the headings.

2. Security and Access

2.1 Signup

This section of the User manual describes how to apply for a new drug license. User will register you with the details. And also get OTP after submitting application and also email verification.

2.1.1 Process Flow



2.1.2 Detailed Steps

Enter valid User Applicant Name, Email Id, Mobile No, Landline, Applicant Building No, Applicant Street, P.O, P.S, City/Village, Password, Confirm Password, and Enter Captcha.

1. Click Submit.
2. Enter OTP.
3. Click ‘Submit’ button.

2.1.3 Screenshot View

As on 03 Dec 2020

Sl No	Service	Time Limit	Total Application	Total Licence	Average Time	Median Time	Minimum Time	Maximum Time
1	New Drug License for Manufacturing	90 Days	0	0	0	0	0	0
2	New Drug License for Wholesale	90 Days	17062	12131	61	39	1	1117
3	New Drug License for Retail Sale (Pharmacy)	90 Days	24716	16867	60	39	1	1060
4	Retention of Drug License for Manufacturing	90 Days	0	0	0	0	0	0
5	Retention of Drug License for Wholesale	90 Days	15831	15763	1	1	1	1
6	Retention of Drug License for Retail (Pharmacy)	90 Days	24979	24841	1	1	1	1

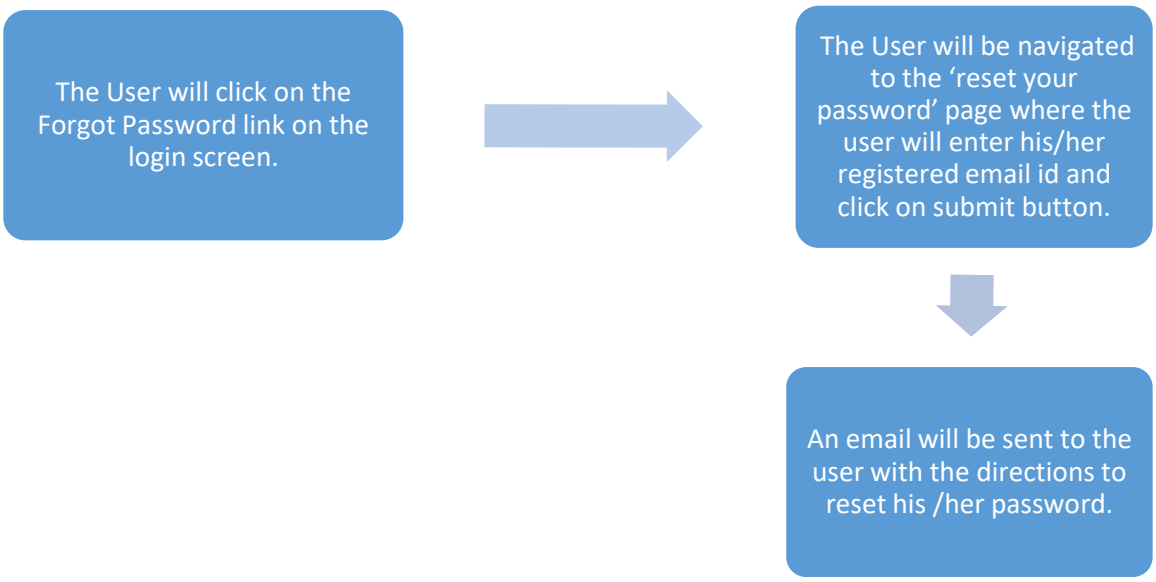
This is the User Sign Up screen

This is the OTP screen

2.2 Forgot Password

This section of the User manual describes what the User will do once he forgets the password. The User will click on the Forgot Password link on the login screen. The User will be navigated to the 'reset your password' page where the user will enter his/her registered email id and click on submit button. An email will be sent to the user with the directions to reset his /her password.

2.2.1 Process Flow



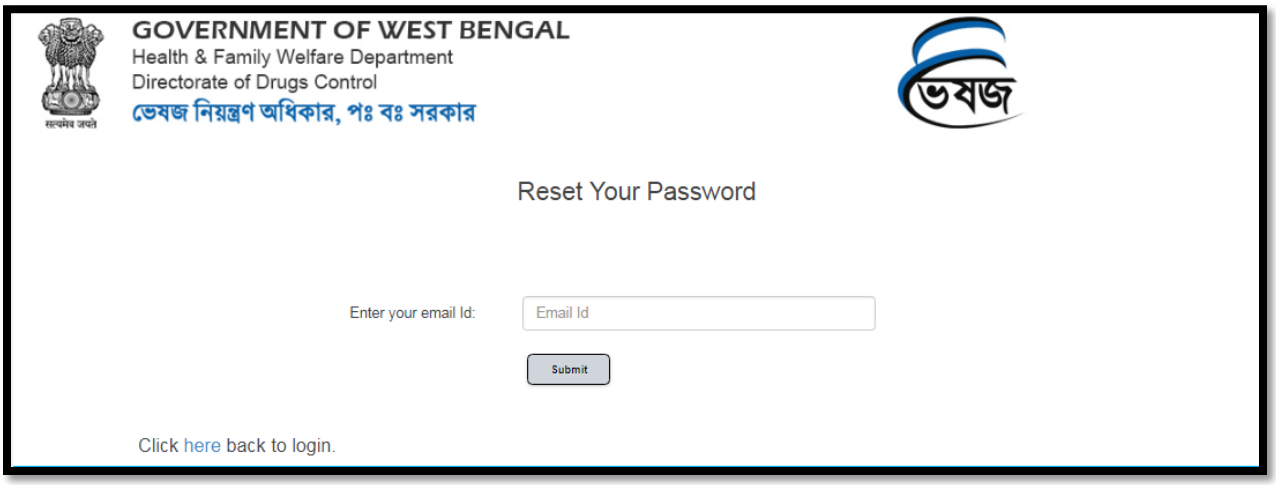
2.2.2 Detailed Steps

- The User will click on the Forgot Password link on the login screen.
- The User will be navigated to the 'reset your password' page where the user will enter his/her registered email id and click on submit button.
- An email will be sent to the user with the directions to reset his /her password.

2.2.3 Screenshot View

The User will click on the Forgot Password link on the login screen.

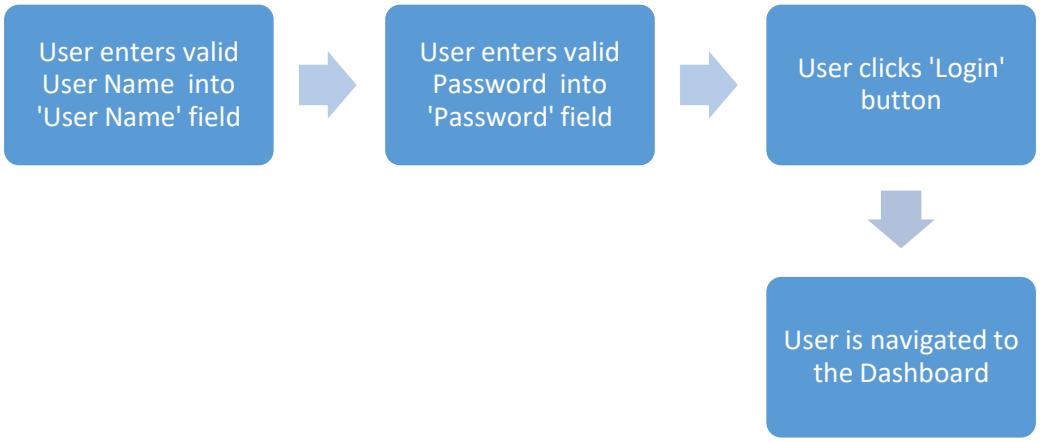
The User will be navigated to the 'reset your password' page where the user will enter his/her registered email id and click on submit button. An email will be sent to the user with the directions to reset his /her password.



2.3 Logging-in

This section of the User manual describes how a User will log-in to the application. It is the first thing that will be seen on opening the application (as seen in 2.1.3screenshot below). Each User will have a unique Username and Password which must be entered.

2.2.3 Process Flow



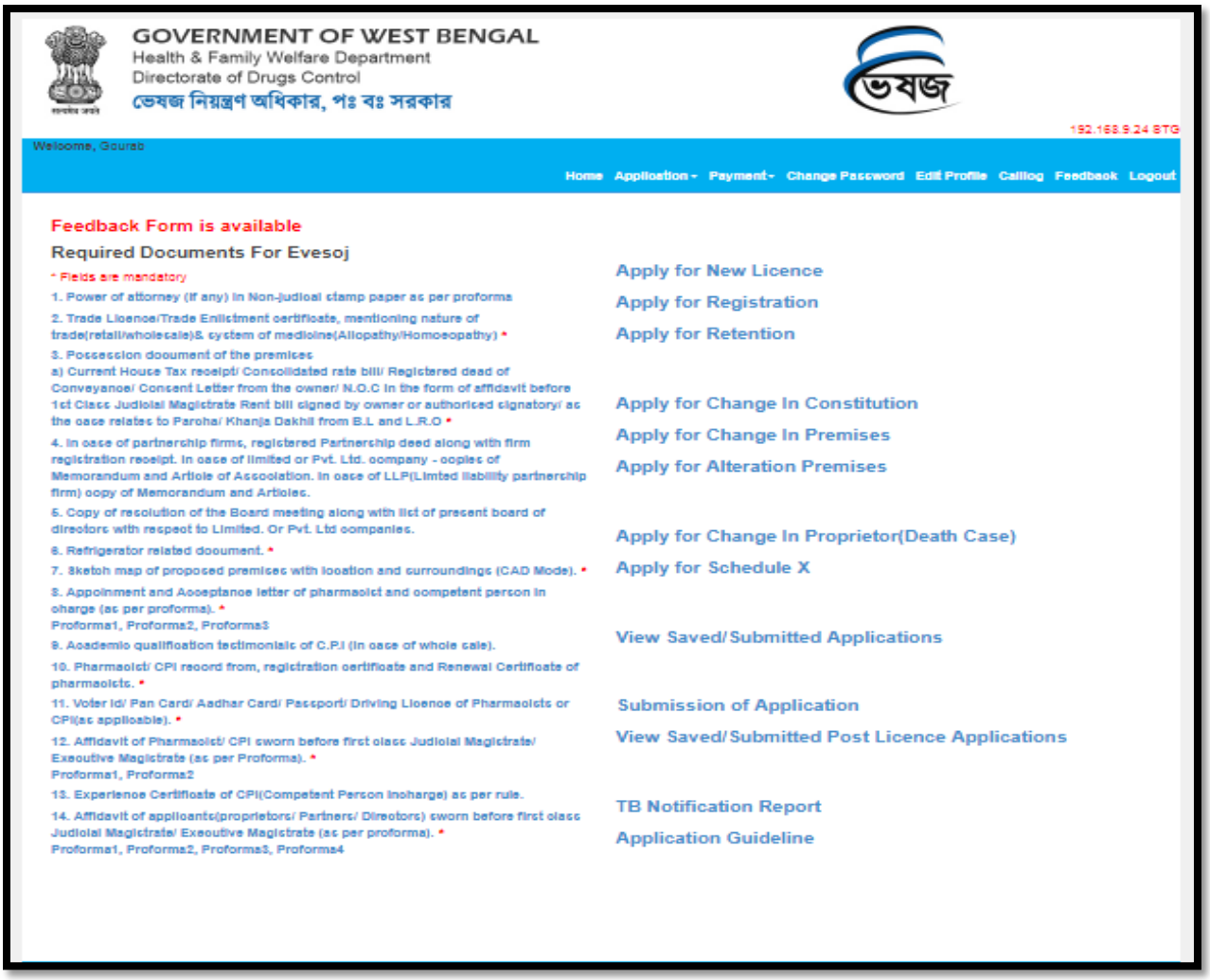
2.2.4 Detailed Steps

1. Enter valid User name into ‘User Name’ field (see 2.1.3 Screenshot displaying all Mandatory fields required for log-in)
2. Enter valid password into ‘Password’ field
3. User enters the ‘captcha’ as provided. If the User is unable to understand the ‘captcha’ he/she may reload the ‘captcha.’
4. Click ‘Login’ button (User will be directed to Dashboard – see 2.1.3 Screenshot)

2.2.5 Screenshot View

This is the User log-in screen

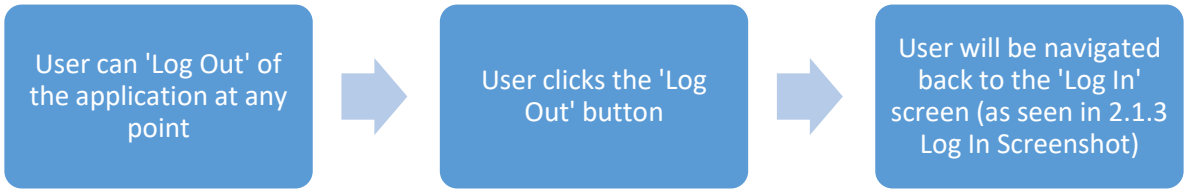
This is the Dashboard screen



2.3 Logging-out

This section of the User manual describes how a User will log-out of the Software. When the User has finished using the Software User may choose to log-out by selecting the 'Log Out' button on the Main Menu screen (as seen in 2.2.3screenshot below). When using a shared computer it is recommended to log-out when finished to prevent other Users from using the Application with your log-in credentials.

2.3.1 Process Flow



2.3.2 Detailed Steps

1. At any point User can log out of the Application
2. User clicks 'Log Out' button on top right hand side of the screen (see 2.2.3 screenshots below)
3. User will be logged out of the application and navigated back to the Log In Menu

2.3.3 Screenshot View

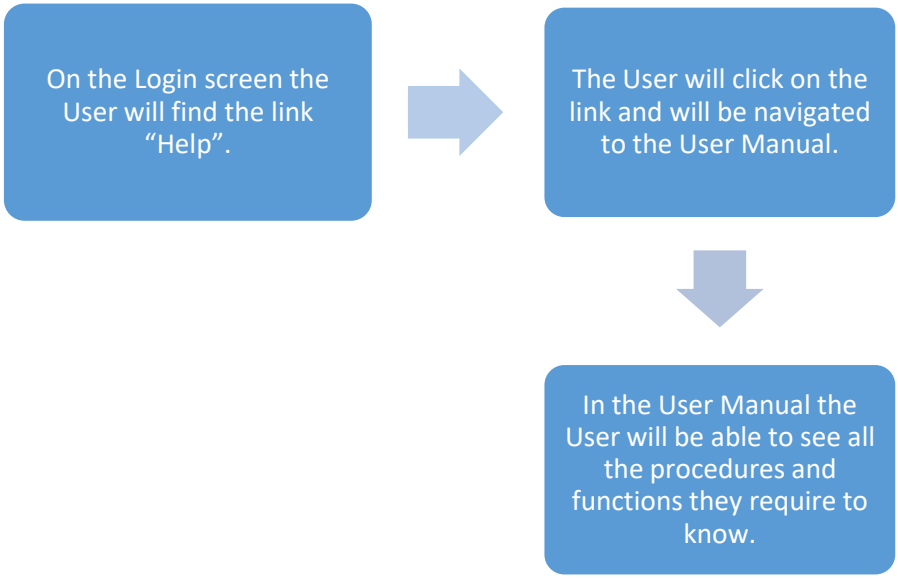
This is the Main Menu screen which displays the ‘Log Out’ button. User clicks ‘Log Out’ when they are finished with the Application.

After clicking the 'Log Out' button, User is navigated back to the 'Log In' screen

3 Help

On the Login screen the User will find the link “Help”. The User will click on the link and will be navigated to the User Manual. In the User Manual the User will be able to see all the procedures and functions they require to know.

3.1 Process Flow



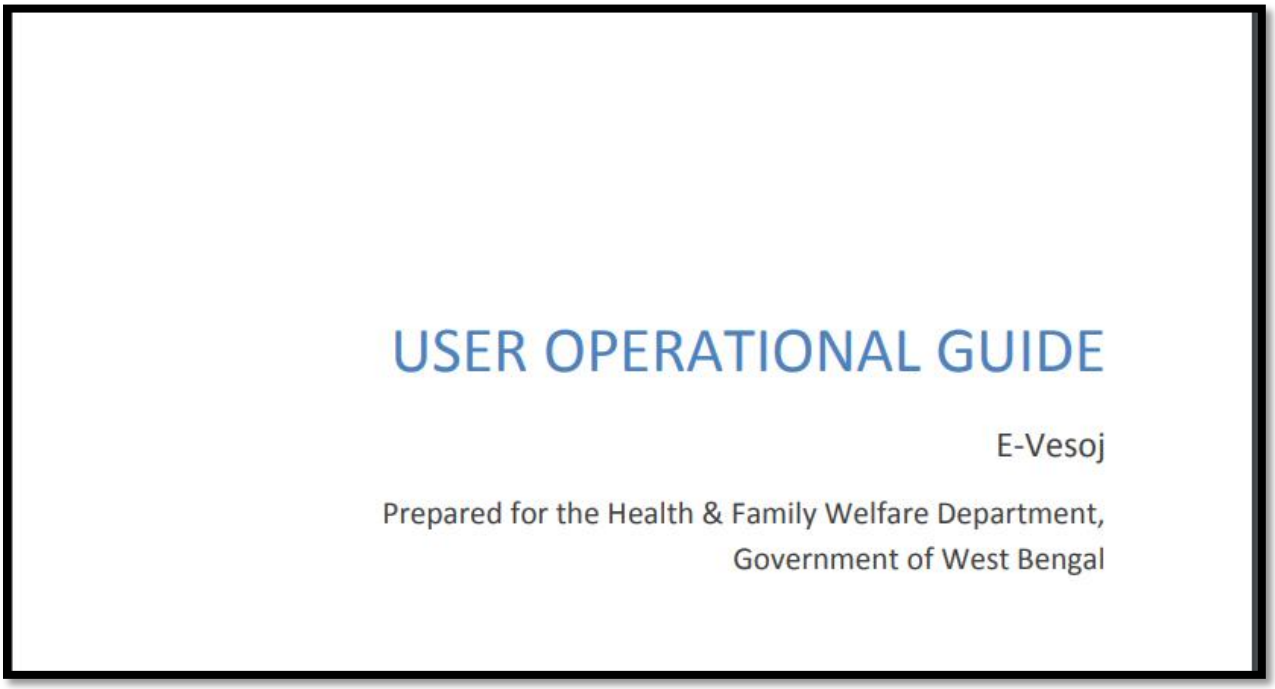
3.2 Detailed Steps

- On the Login screen the User will find the link “Help”.
- The User will click on the link and will be navigated to the User Manual.
- In the User Manual the User will be able to see all the procedures and functions they require to know.

3.3 Screenshot View

On the Login screen the User will find the link “Help”.

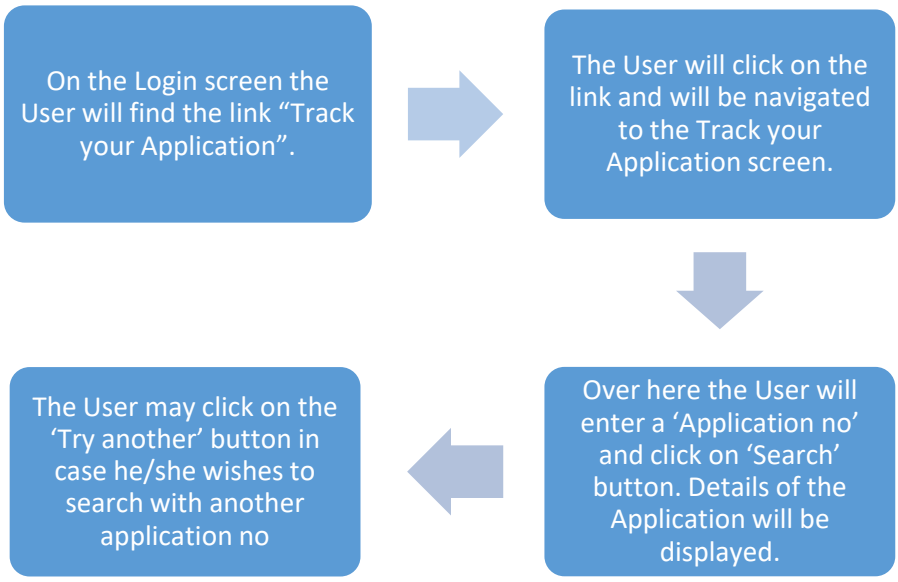
The User will click on the link and will be navigated to the User Manual. In the User Manual the User will be able to see all the procedures and functions they require to know.



4. Track Your Application

On the Login screen the User will find the link “Track your Application”. The User will click on the link and will be navigated to the Track your Application screen. Over here the User will enter a ‘Application no’ and click on ‘Search’ button. Details of the Application will be displayed. The User may click on the ‘Try another’ button in case he/she wishes to search with another application no.

4.1 Process Flow



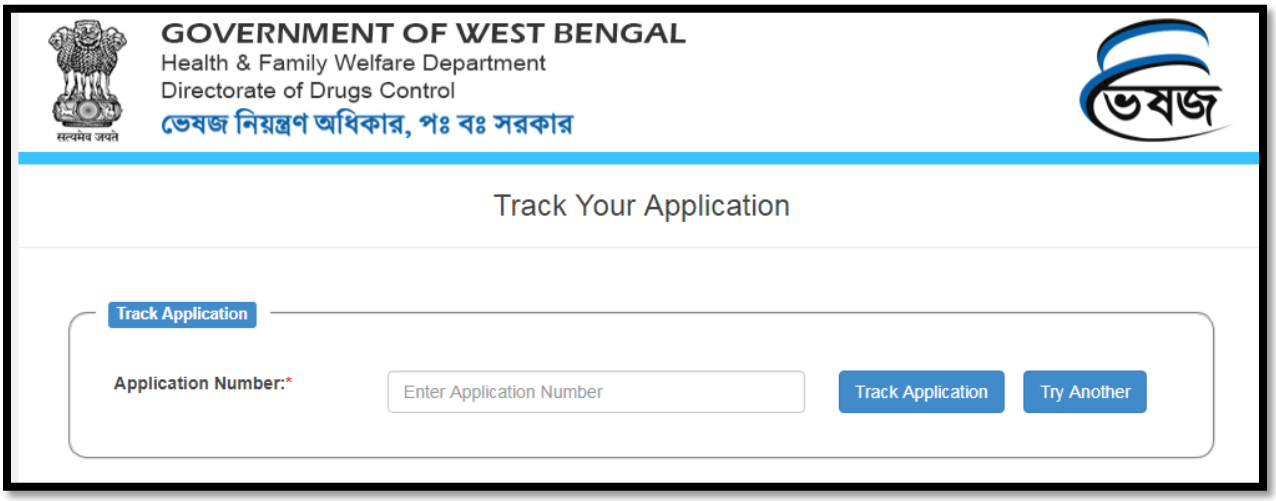
4.2 Detailed Steps

- On the Login screen the User will find the link “Track your Application”.
- The User will click on the link and will be navigated to the Track your Application screen.
- Over here the User will enter a ‘Application no’ and click on ‘Search’ button. Details of the Application will be displayed.
- The User may click on the ‘Try another’ button in case he/she wishes to search with another application no

4.3 Screenshot View

On the Login screen the User will find the link "Track your Application".

The User will click on the link and will be navigated to the Track your Application screen. Over here the User will enter a 'Application no' and click on 'Search' button. Details of the Application will be displayed. The User may click on the 'Try another' button in case he/she wishes to search with another application no.



Track Application

Application Number:* 358 Track Application Try Another

Application Status Details

Application Status

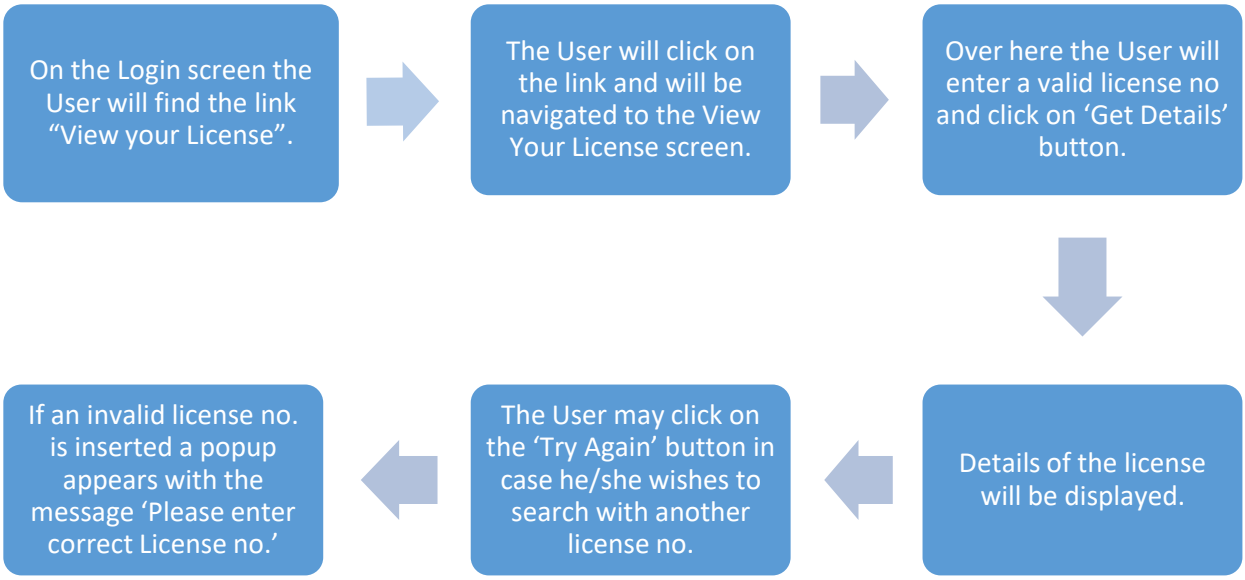
Show 10 entries Search:

Task Done By	Task name	Remarks	Start Date	End Date	Day Taken	Next Task Taken By
K.S. Muralikrishna & G.M. Reddy	Application Filed	Application Filed For Renewal	2017-03-22	2017-03-22	0	K.S. Muralikrishna & G.M. Reddy
K.S. Muralikrishna & G.M. Reddy	Staff Records Filled By Applicant	Staff Records Filled	2017-03-22	2017-03-22	0	K.S. Muralikrishna & G.M. Reddy
K.S. Muralikrishna & G.M. Reddy	Documents Uploaded By Applicant	Uploadedphoto	2017-03-22	2017-03-22	0	K.S. Muralikrishna & G.M. Reddy
K.S. Muralikrishna & G.M. Reddy	Documents Uploaded By Applicant	Uploadedphoto	2017-03-22	2017-03-22	0	K.S. Muralikrishna & G.M. Reddy

5. View Your License

On the Login screen the User will find the link “View your License”. The User will click on the link and will be navigated to the View Your License screen. Over here the User will enter a valid license no and click on ‘Get Details’ button. Details of the license will be displayed. The User may click on the ‘Try Again’ button in case he/she wishes to search with another license no. If an invalid license no. is inserted a popup appears with the message ‘Please enter correct License no.’

5.1 Process Flow



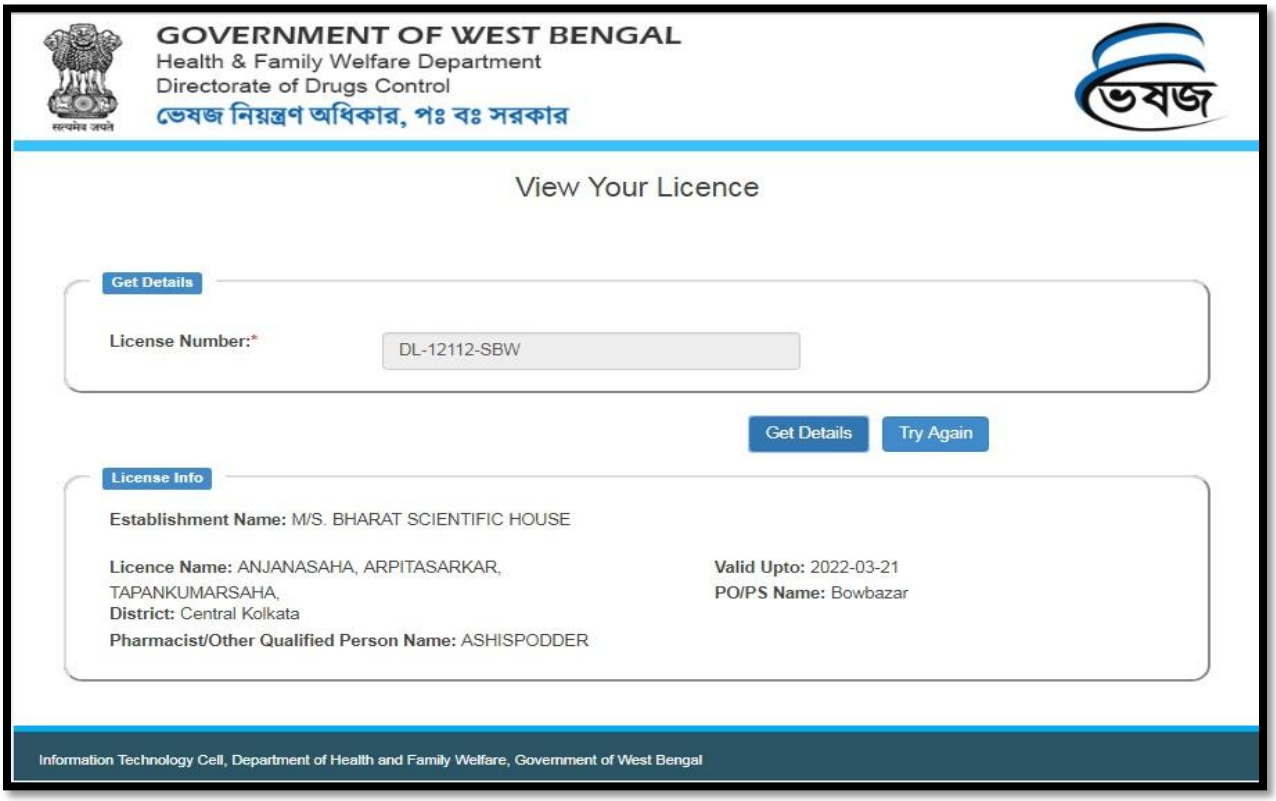
5.2 Detailed Steps

- On the Login screen the User will find the link “View your License”.
- The User will click on the link and will be navigated to the View Your License screen.
- Over here the User will enter a valid license no and click on ‘Get Details’ button.
- Details of the license will be displayed.
- The User may click on the ‘Try Again’ button in case he/she wishes to search with another license no.
- If an invalid license no. is inserted a popup appears with the message ‘Please enter correct License no.’

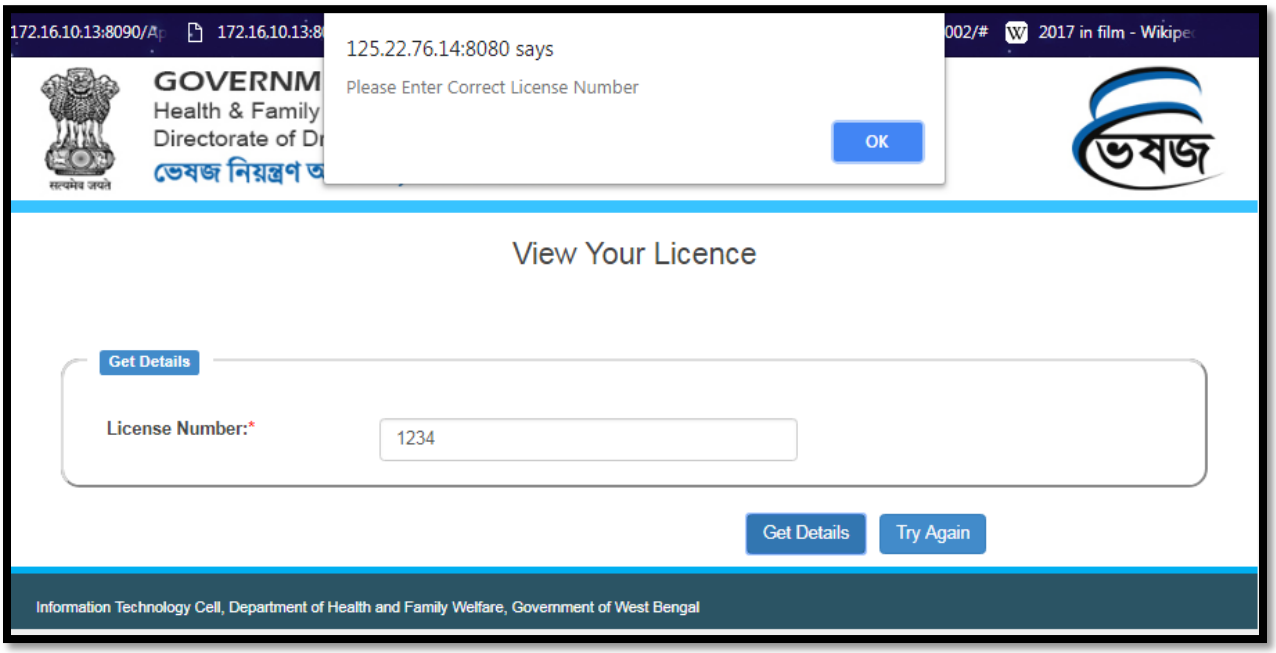
5.3 Screenshot View

On the Login screen the User will find the link “View your License”.

The User will click on the link and will be navigated to the View Your License screen. Over here the User will enter a valid license no and click on ‘Get Details’ button. Details of the license will be displayed. The User may click on the ‘Try Again’ button in case he/she wishes to search with another license no.



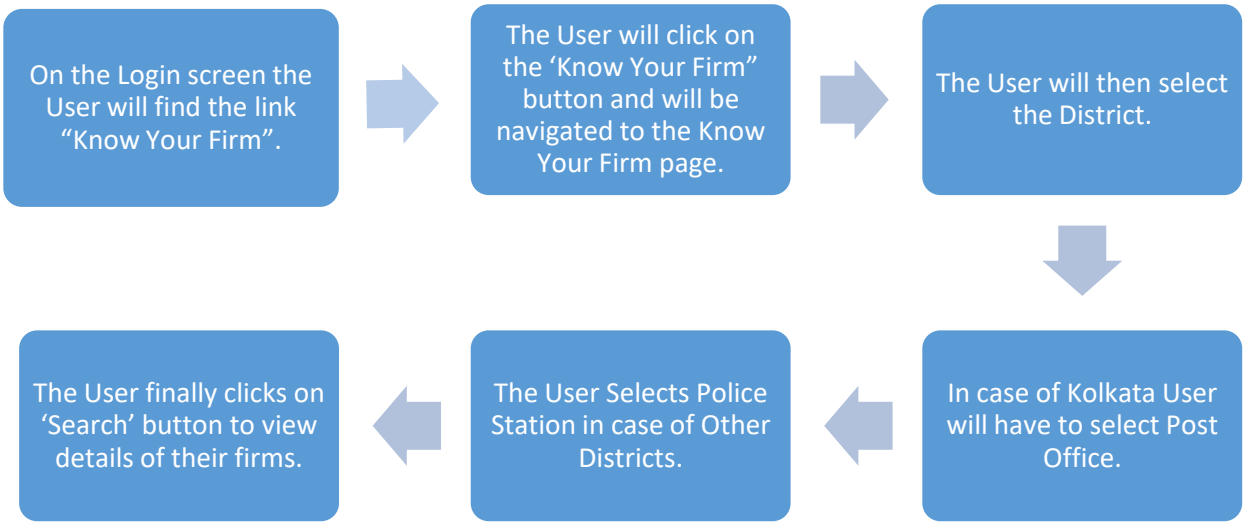
If an invalid license no. is inserted a popup appears with the message ‘Please enter correct License no.’



6. Know Your Firm

On the Login screen the User will find the link “Know Your Firm”. The User will click on the ‘Know Your Firm” button and will be navigated to the Know Your Firm page. The User will then select the District. In case of Kolkata User will have to select Post Office. The User Selects Police Station in case of Other Districts. The User finally clicks on ‘Search’ button to view the details of their firms.

6.1 Process Flow



6.2 Detailed Steps

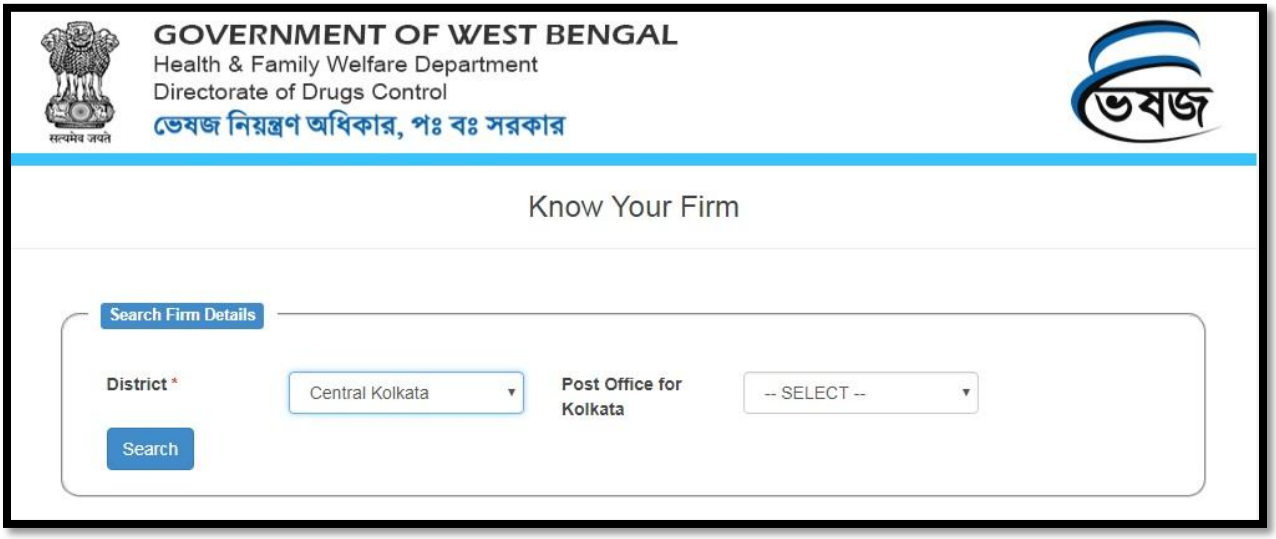
- On the Login screen the User will find the link “Know Your Firm”.
- The User will click on the ‘Know Your Firm” button and will be navigated to the Know Your Firm page.
- The User will then select the District.
- In case of Kolkata User will have to select Post Office.
- The User Selects Police Station in case of Other Districts.
- The User finally clicks on ‘Search’ button to view details of their firms.

6.3 Screenshot View

On the Login screen the User will find the link “Know Your Firm”.

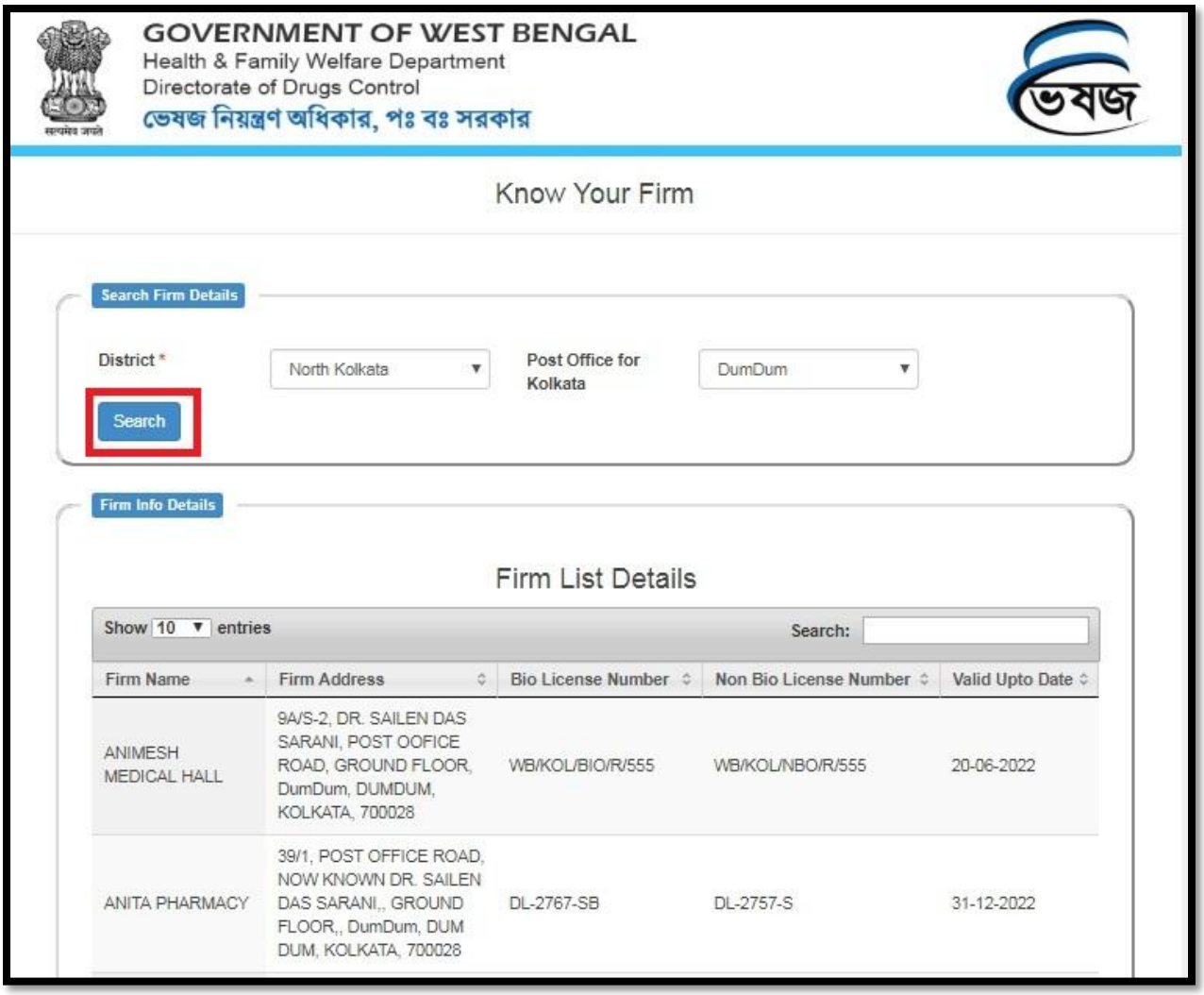
The User will click on the ‘Know Your Firm” button and will be navigated to the Know Your Firm page.

The User will then select the District. In case of Kolkata User will have to select Post Office



The User Selects police Station in case of Other Districts

The User finally clicks on ‘Search’ button to view r details of their firms.



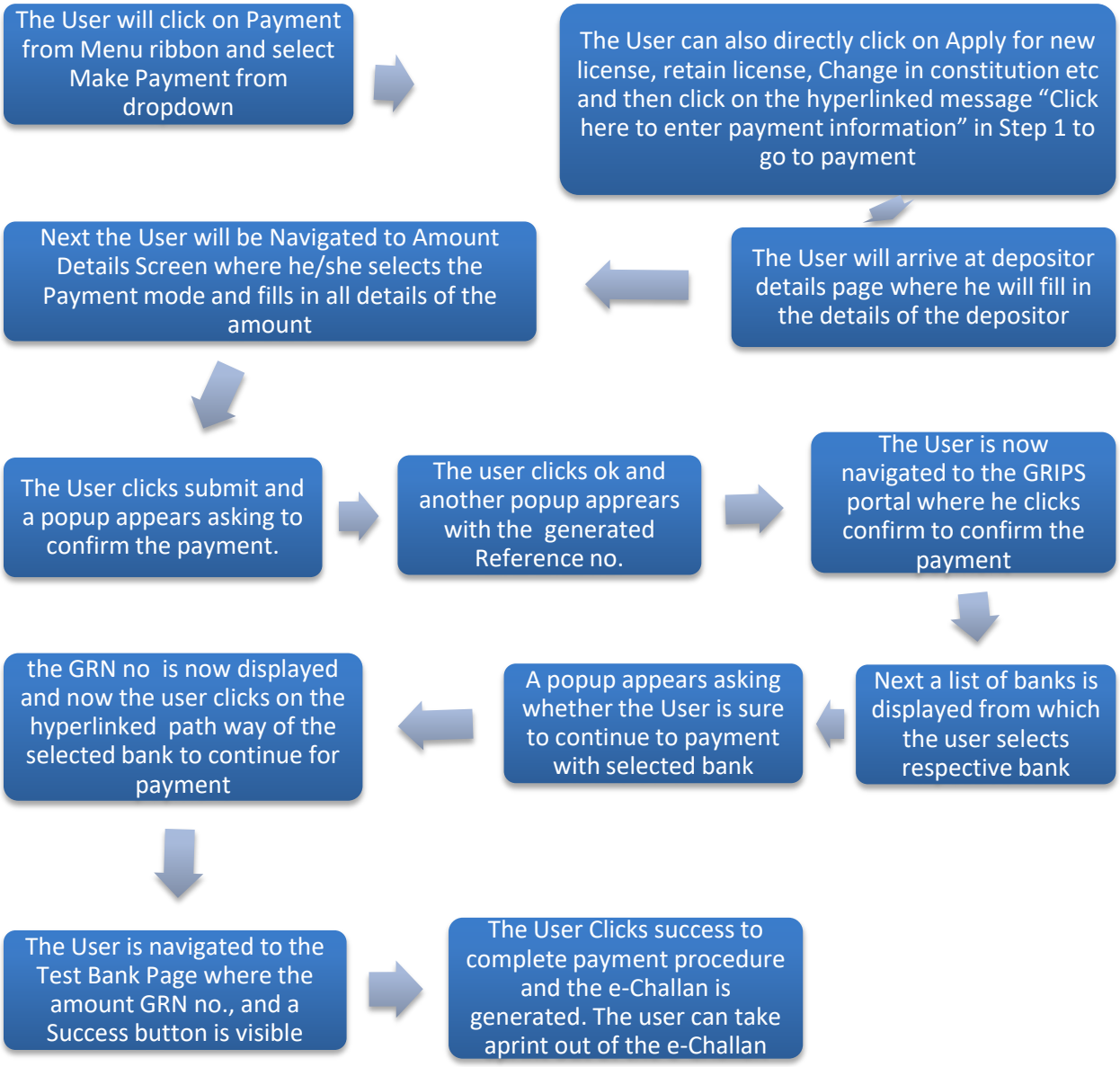
7. Home Page

If the User has not used GRIPS to make payment till now then:-

7.1 Payment (With GRIPS)

The Payment any application can only be done with GRIPS in E- Vesoj software. The User can apply for New License, Apply for Retain License, Apply for Change in Constitution, Apply for Change in Premises, Apply for Alteration Premises, Apply for Change in Proprietor (Death Case) and Apply for Schedule X. The User will have to pay Rs 3000 in case he is applying for both Bio and Non-Bio License, Rs 1500 if he is applying for either Bio or Non-Bio license or he will pay Rs 500 if applying for Schedule X. The user will receive an e-Challan at success of application.

7.1.1 Process Flow



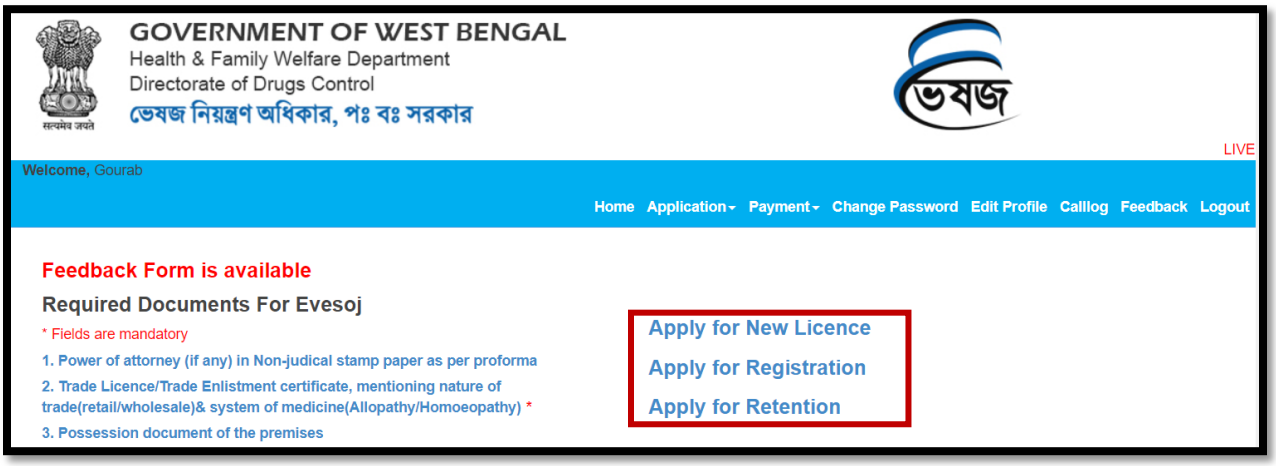
7.1.2 Detailed Steps

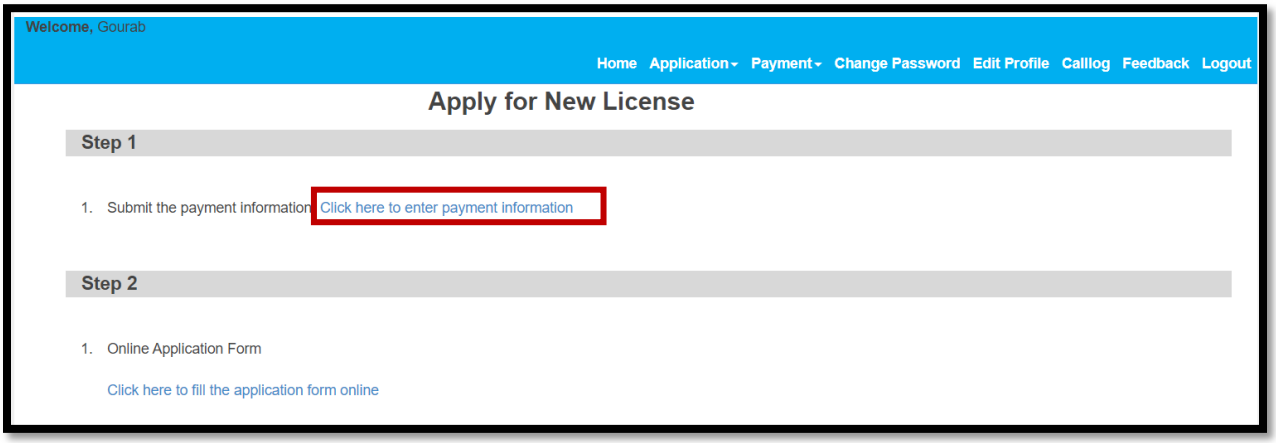
1. The User will click on Payment from Menu ribbon and select Make Payment from dropdown.
2. The User can also directly click on Apply for new license, retain license, Change in constitution etc and then click on the hyperlinked message “Click here to enter payment information” in Step 1 to go to payment.
3. The User will arrive at depositor details page where he will fill in the details of the depositor.
4. Next the User will be navigated to Amount Details Screen where he/she selects the Payment mode and fills in all details of the amount.
5. The User clicks submit and a popup appears asking to confirm the payment.
6. The user clicks ok and another popup appears with the generated Reference no.
7. The User is now navigated to the GRIPS portal where he clicks confirm to confirm the payment.
8. Next a list of banks is displayed from which the user selects respective bank.
9. A popup appears asking whether the User is sure to continue to payment with selected bank.
10. The GRN number is now displayed and now the user clicks on the hyperlinked path way of the selected bank to continue for payment.
11. The User is navigated to the Test Bank Page where the amount GRN no., and a Success button is visible.
12. The User Clicks success to complete payment procedure and the e-Challan is generated. The user can take a print out of the e-Challan.

7.1.3 Screen Details

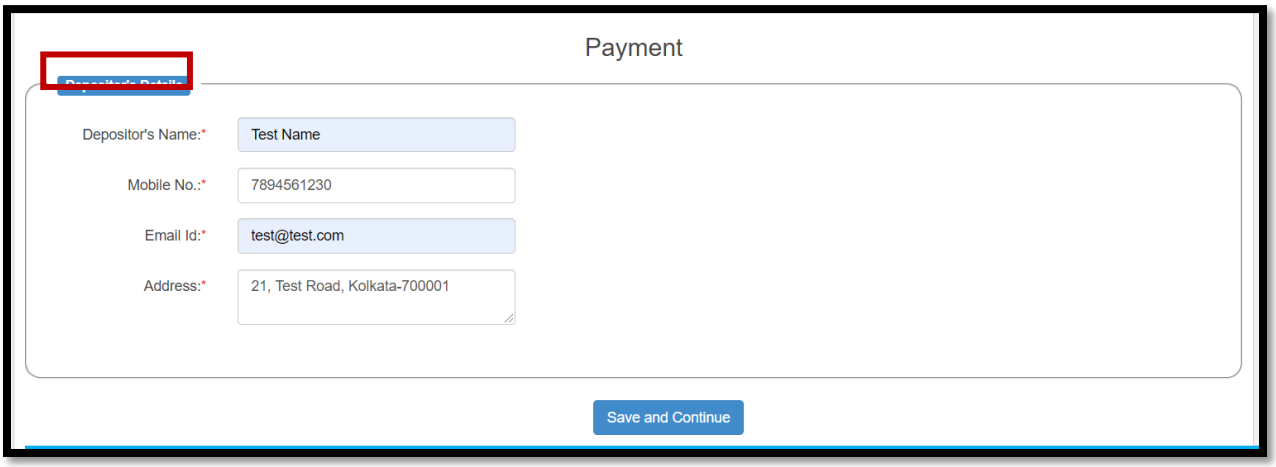
The User will click on Payment from Menu ribbon and select Make Payment from dropdown.

The User can also directly click on Apply for new license, retain license, Change in constitution etc and then click on the hyperlinked message “Click here to enter payment information” in Step 1 to go to payment.

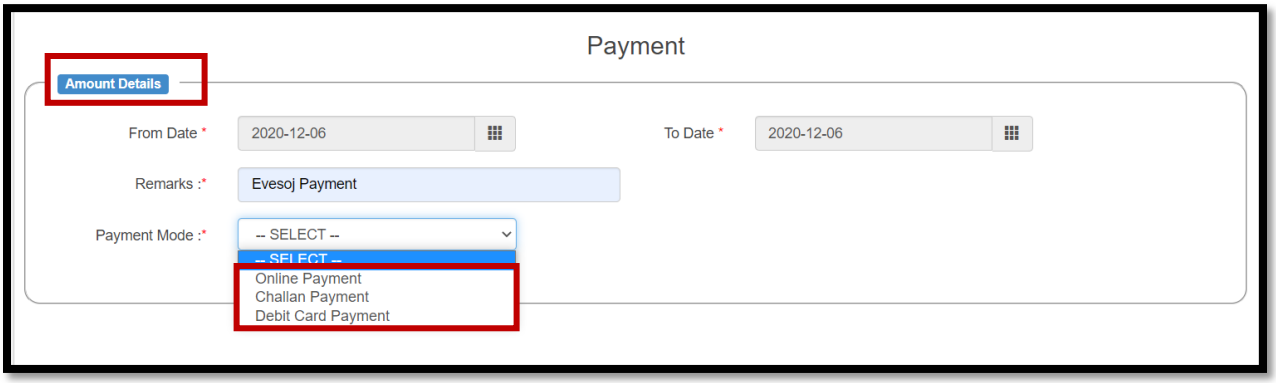


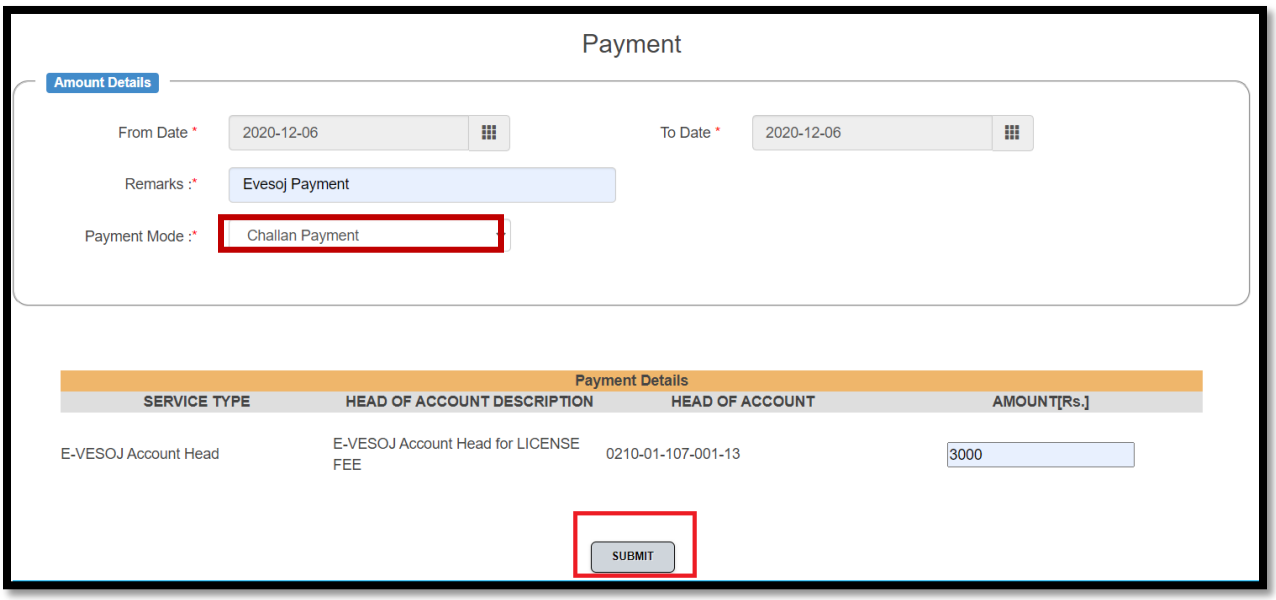


The User will arrive at depositor details page where he will fill in the details of the depositor.

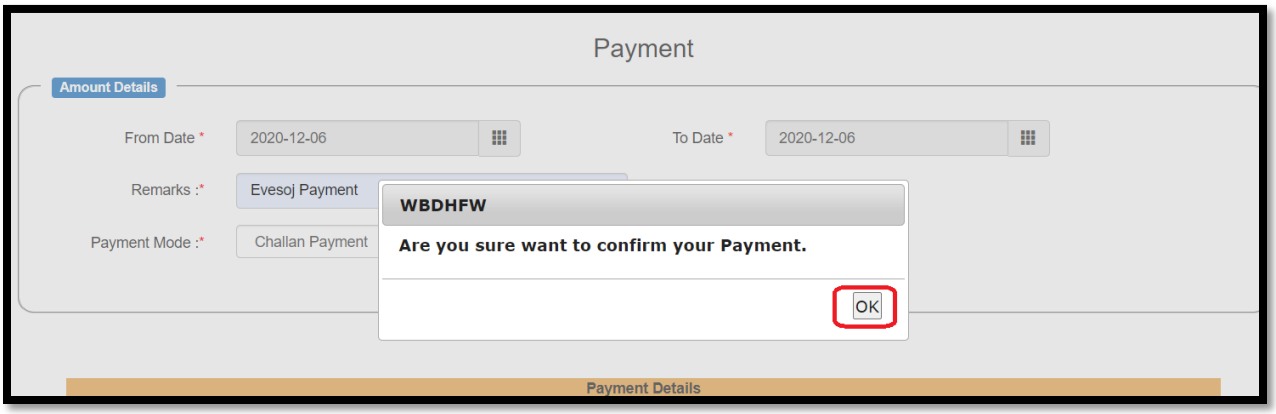


Next the User will be navigated to Amount Details Screen where he/she selects Online Payment or Challan Payment from the Payment mode and fills in all details of the amount.

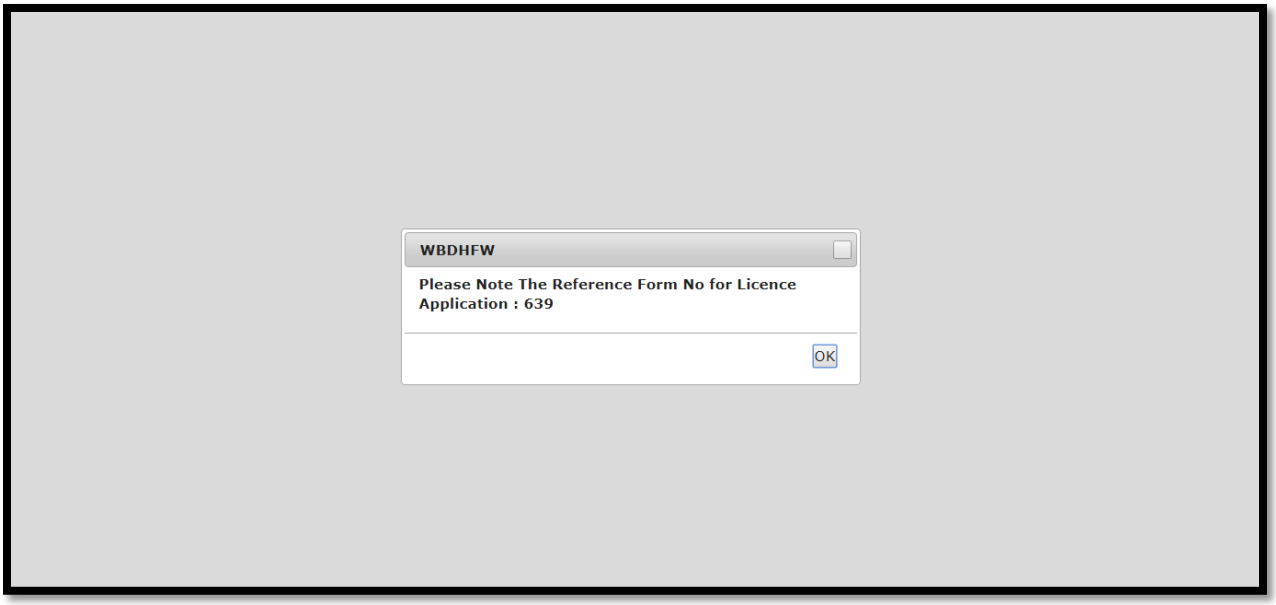




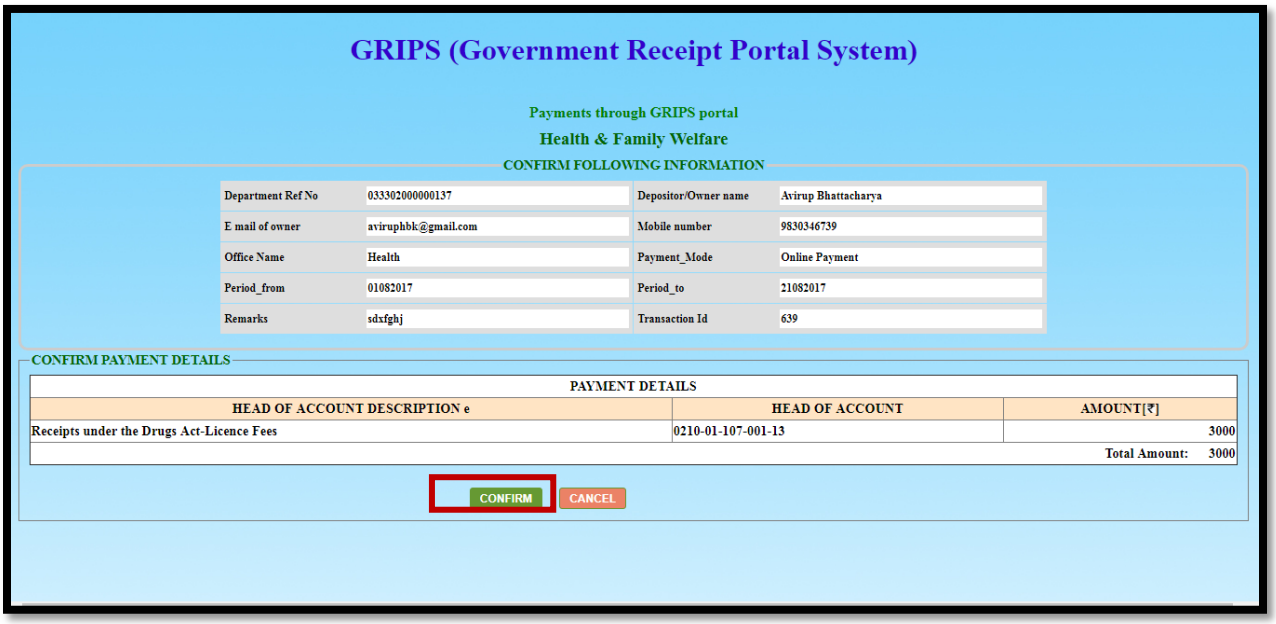
The User clicks submit and a popup appears asking to confirm the payment.



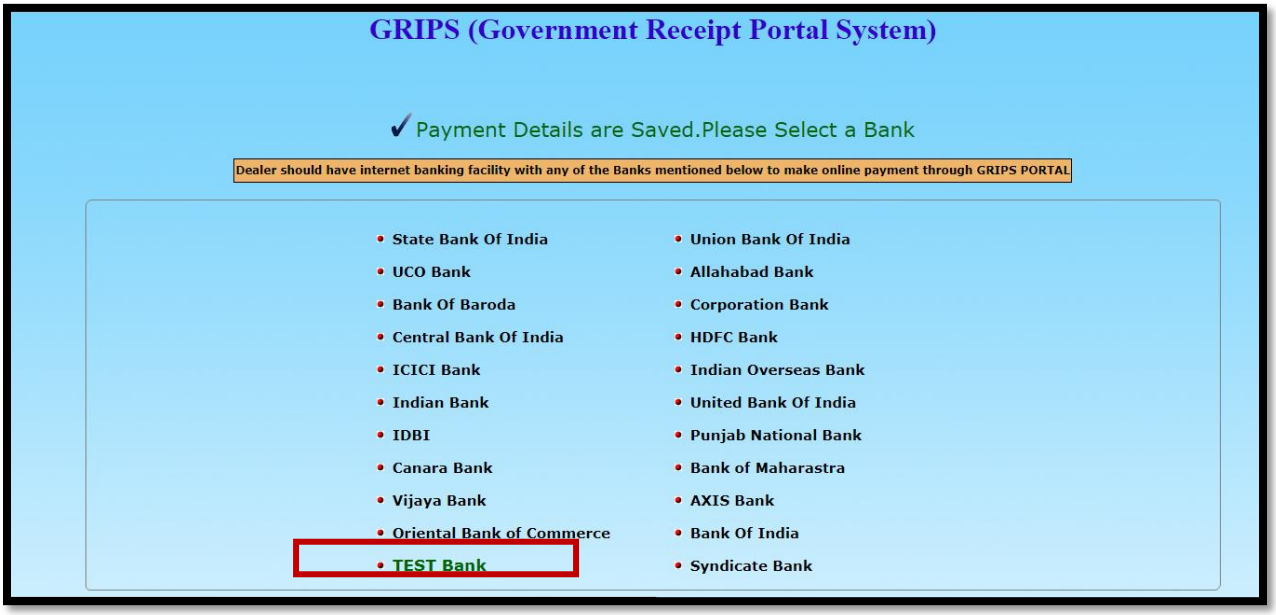
The user clicks ok and another popup appears with the generated Reference no.



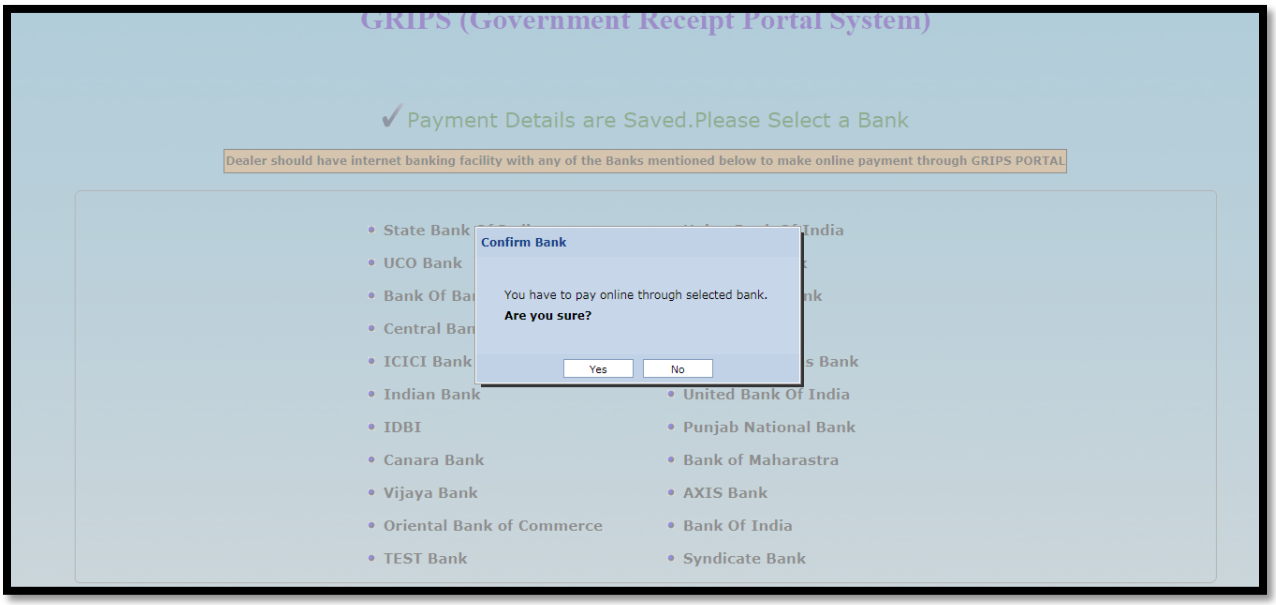
The User is now navigated to the GRIPS portal where he clicks confirm to confirm the payment.



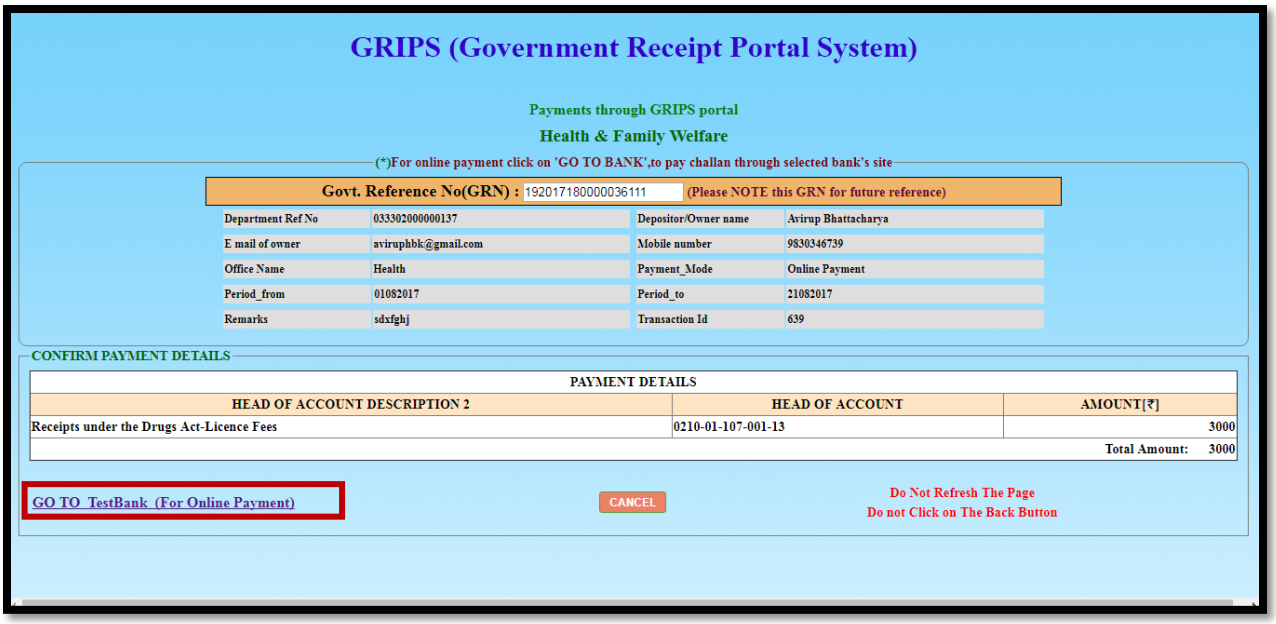
Next a list of banks is displayed from which the user selects respective bank.

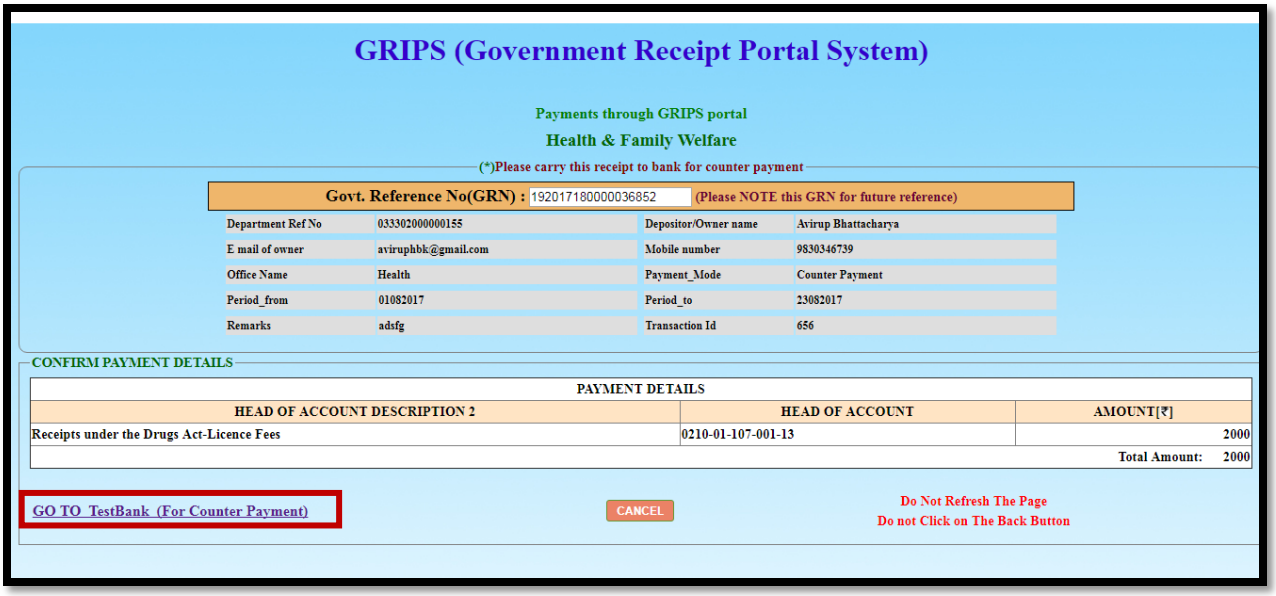


A popup appears asking whether the User is sure to continue to payment with selected bank.

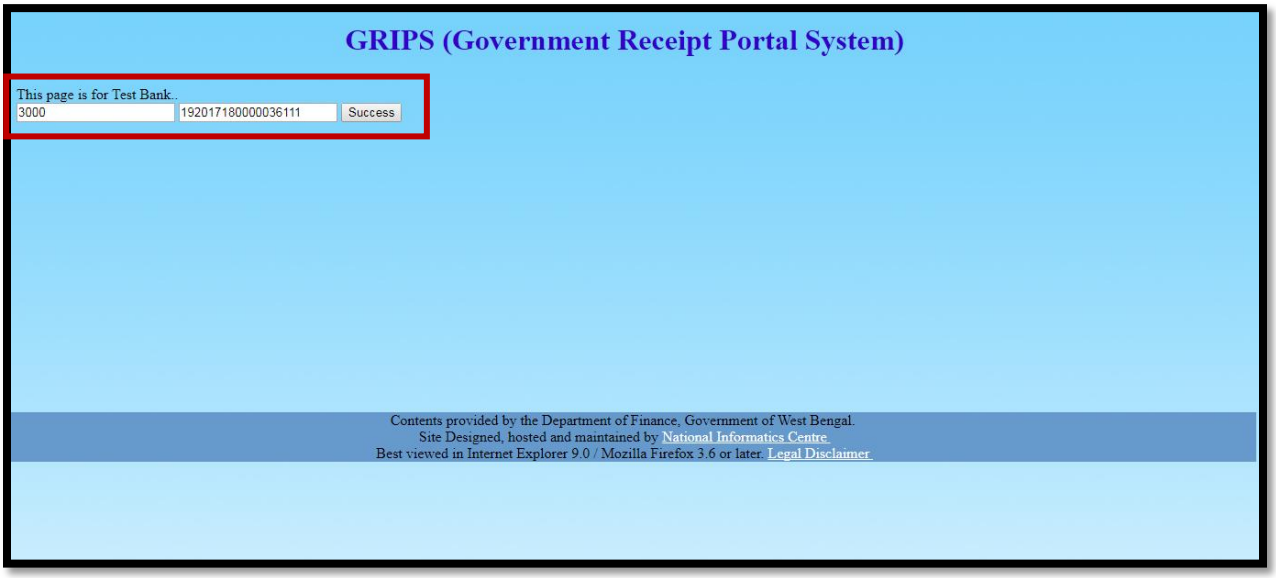


The GRN number is now displayed and now the user clicks on the hyperlinked path way of the selected bank to continue for online payment or Challan Payment.

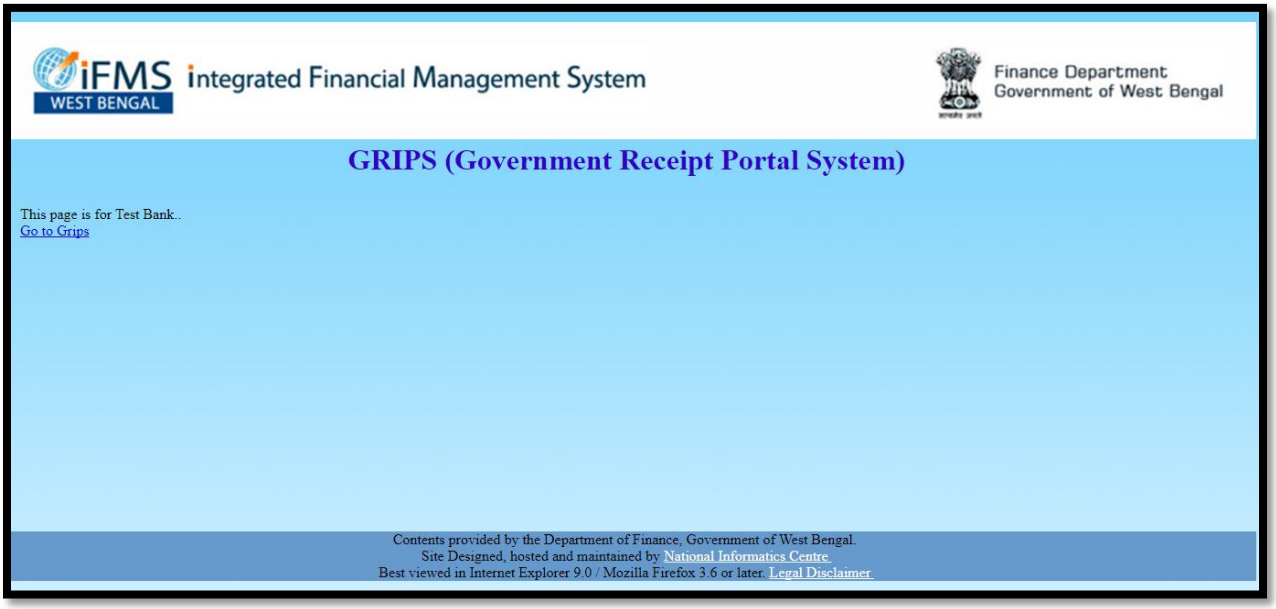




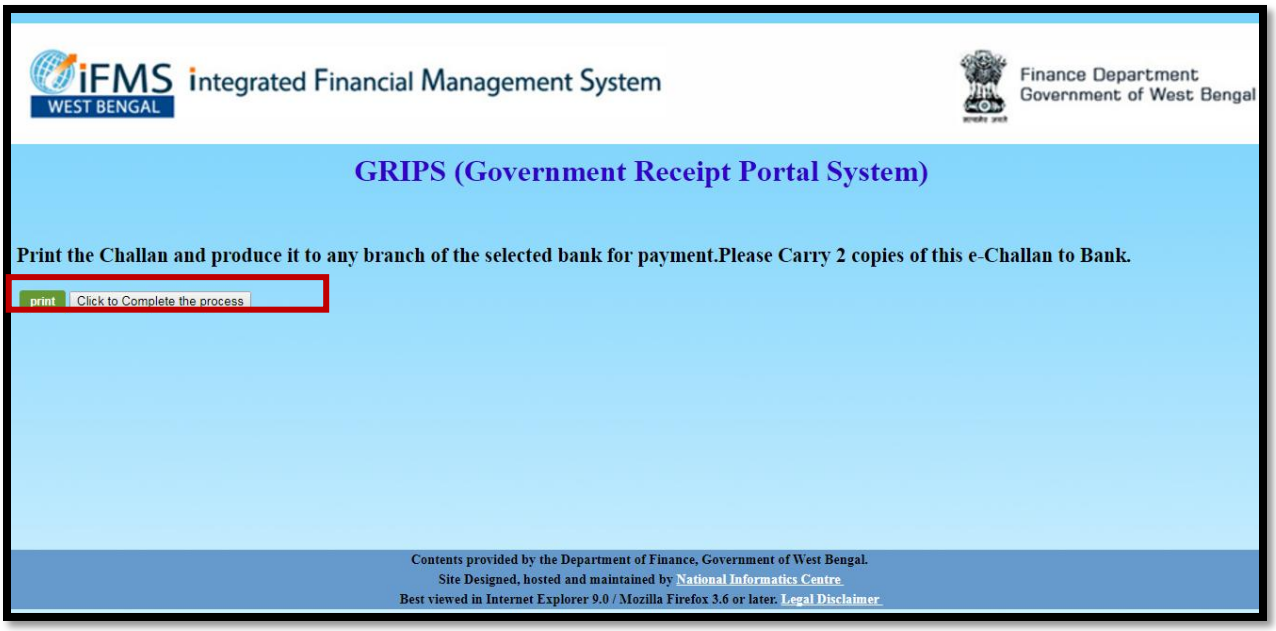
The User is navigated to the Test Bank Page where the amount GRN no., and a Success button is visible.



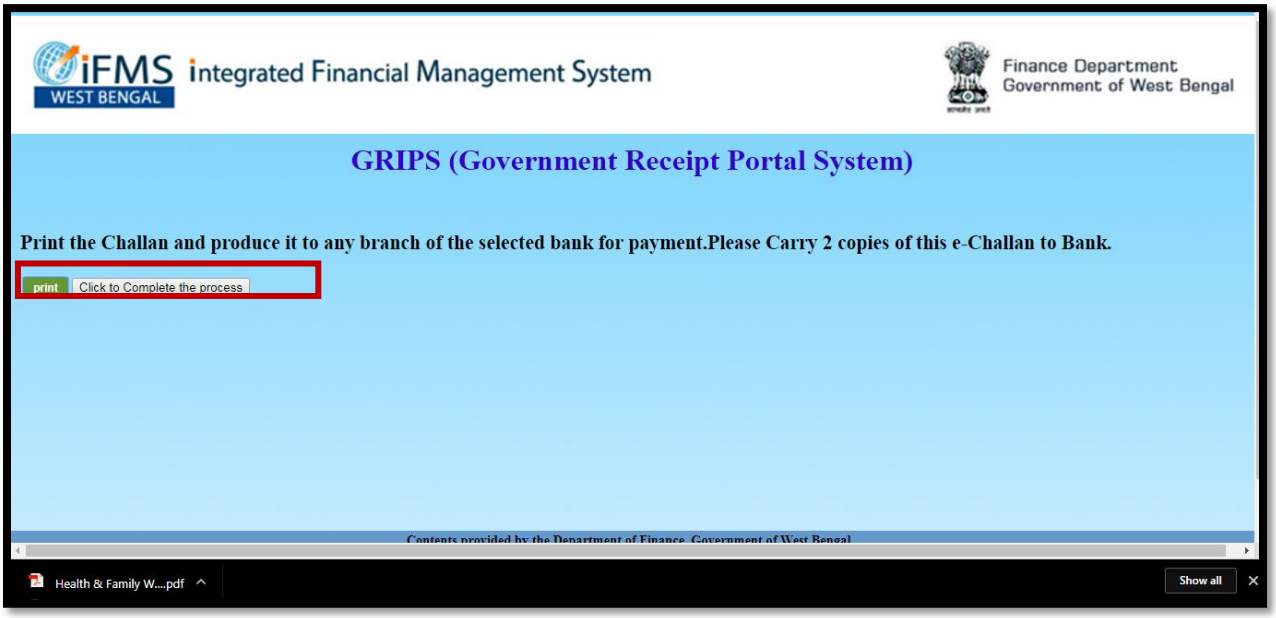
In Case of Challan Payment the User is navigated to the Test Bank Page where he/she finds a hyperlinked message asking him/her to 'Go to GRIPS.



On clicking 'Go to GRIPS' the user is navigated to GRIPS page where he views two options 'Print' and 'Click to complete process'.

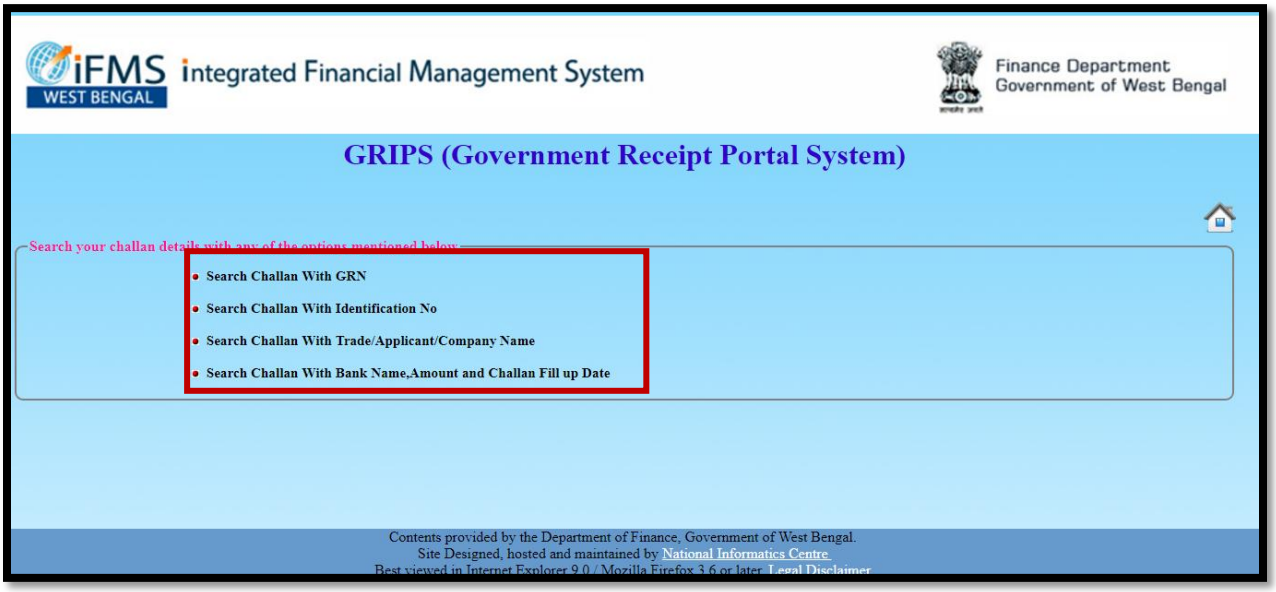


On clicking Print the Challan is downloaded in pdf format. The user can take a print out of the downloaded Challan for future purpose.

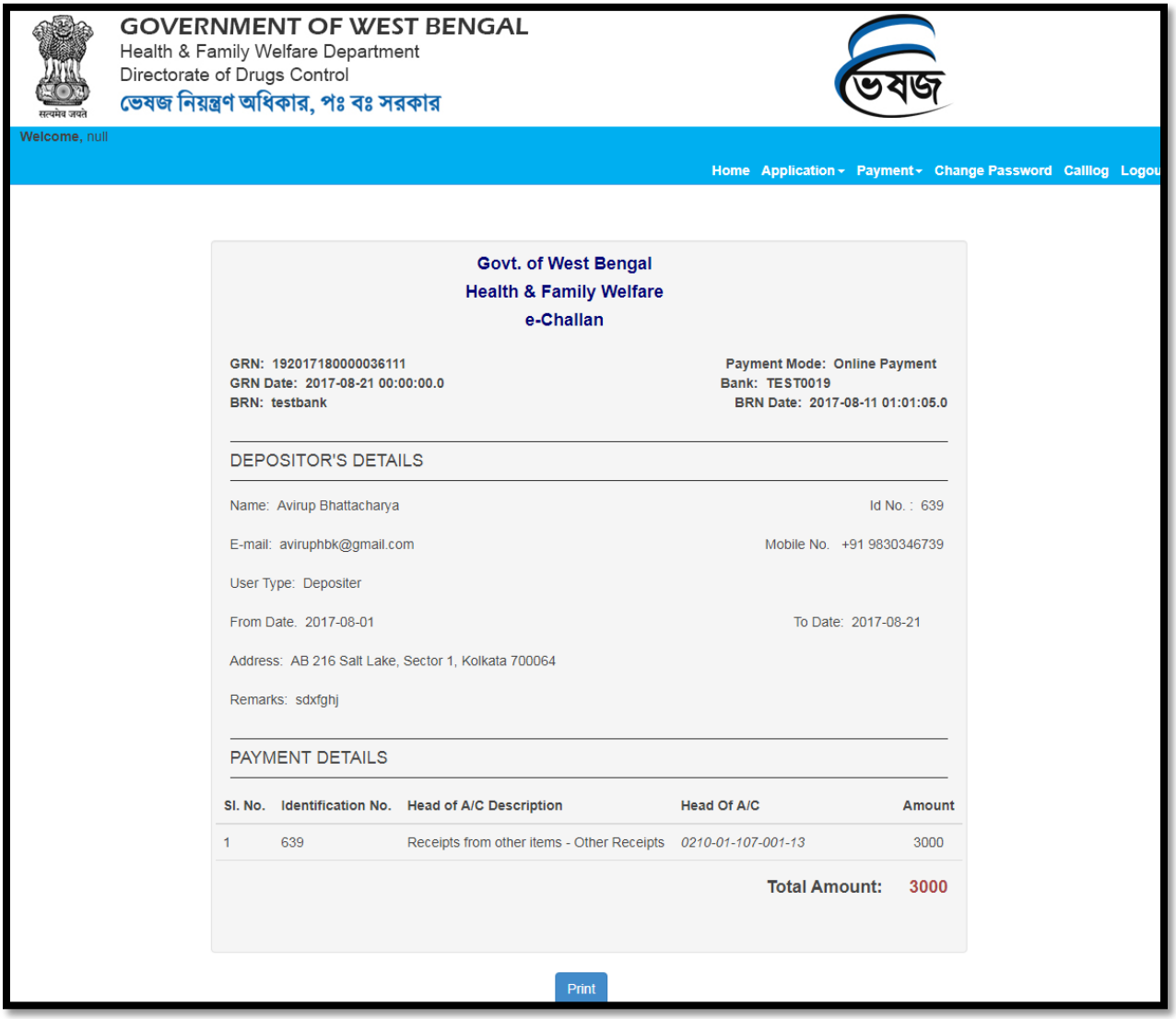


On clicking 'Click to Complete Process' the User is navigated to GRIPS portal. Over here the User clicks on Challan Search.

The user is now navigated to a page where he/she finds different modes of downloading the Challan. The User selects whichever mode convenient and proceeds to download challan.



The User Clicks success to complete ‘Online Payment’ procedure and the e-Challan is generated. The user can take a print out of the e-Challan.



GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

Welcome, null

Home Application Payment Change Password Calllog Logou

Govt. of West Bengal
Health & Family Welfare
e-Challan

GRN: 192017180000036111
GRN Date: 2017-08-21 00:00:00.0
BRN: testbank

Payment Mode: Online Payment
Bank: TEST0019
BRN Date: 2017-08-11 01:01:05.0

DEPOSITOR'S DETAILS

Name: Avirup Bhattacharya
Id No. : 639
E-mail: aviruphbk@gmail.com
Mobile No. +91 9830346739
User Type: Depositer
From Date. 2017-08-01
To Date: 2017-08-21
Address: AB 216 Salt Lake, Sector 1, Kolkata 700064
Remarks: sdxfghj

PAYMENT DETAILS

Sl. No.	Identification No.	Head of A/C Description	Head Of A/C	Amount
1	639	Receipts from other items - Other Receipts	*0210-01-107-001-13*	3000

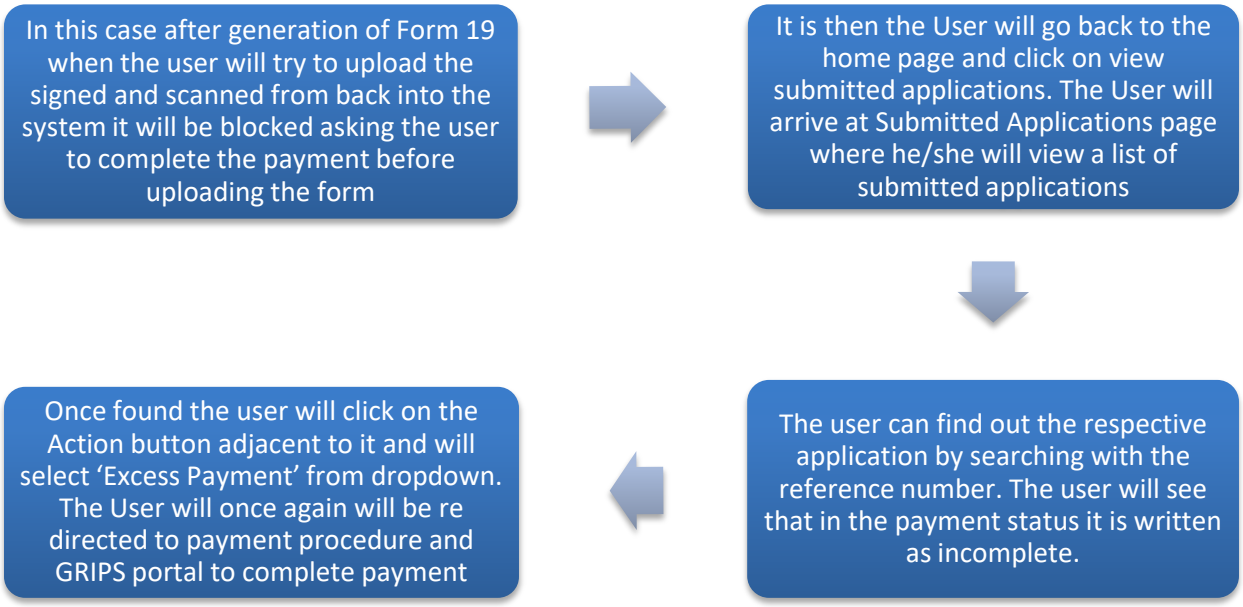
Total Amount: 3000

Print

8 Excess Payment

The Excess Payment is the method of payment used by those applicants who are applying for both Bio and Non-Bio License but who are not paying the entire sum of money at once but in installments. We already know that the User will have to pay Rs 3000 in case he is applying for both Bio and Non-Bio License, Rs 1500 if he is applying for either Bio or Non-Bio license or he will pay Rs 500 if applying for Schedule X. Now the user who is applying for both Bio and Non-Bio License can decide to pay the amount in installment rather than at once. In this case after generation of Form 19 when the user will try to upload the signed and scanned from back into the system it will be blocked asking the user to complete the payment before uploading the form. It is then the User will go back to the home page and click on view submitted applications. The User will arrive at Submitted Applications page where he/she will view a list of submitted applications. The user can find out the respective application by searching with the reference number. The user will see that in the payment status it is written as incomplete. Once found the user will click on the Action button adjacent to it and will select 'Excess Payment' from dropdown. The User will once again will be re directed to payment procedure and GRIPS portal to complete payment. On completion of which the user will be able to upload the Form 19 back into the system.

8.1 Process Flow



8.2 Detailed Steps

1. In this case after generation of Form 19 when the user will try to upload the signed and scanned from back into the system it will be blocked asking the user to complete the payment before uploading the form.

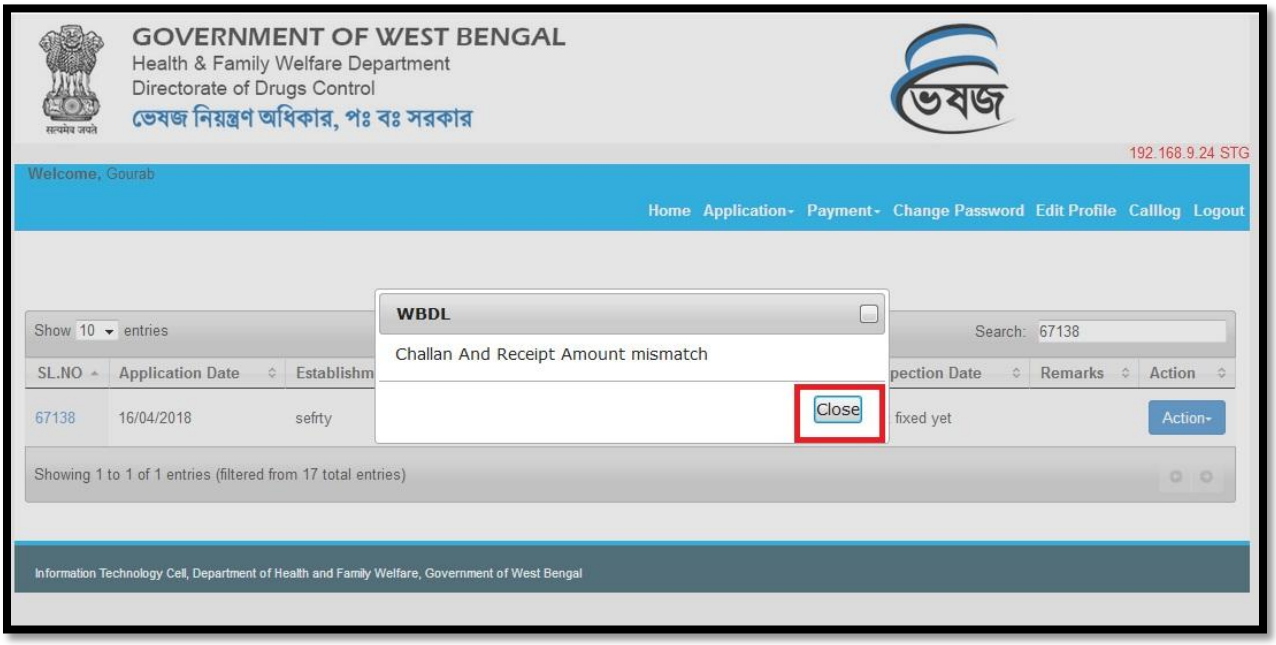
2. It is then the User will go back to the home page and click on view submitted applications. The User will arrive at Submitted Applications page where he/she will view a list of submitted applications.

3. The user can find out the respective application by searching with the reference number. The user will see that in the payment status it is written as incomplete.

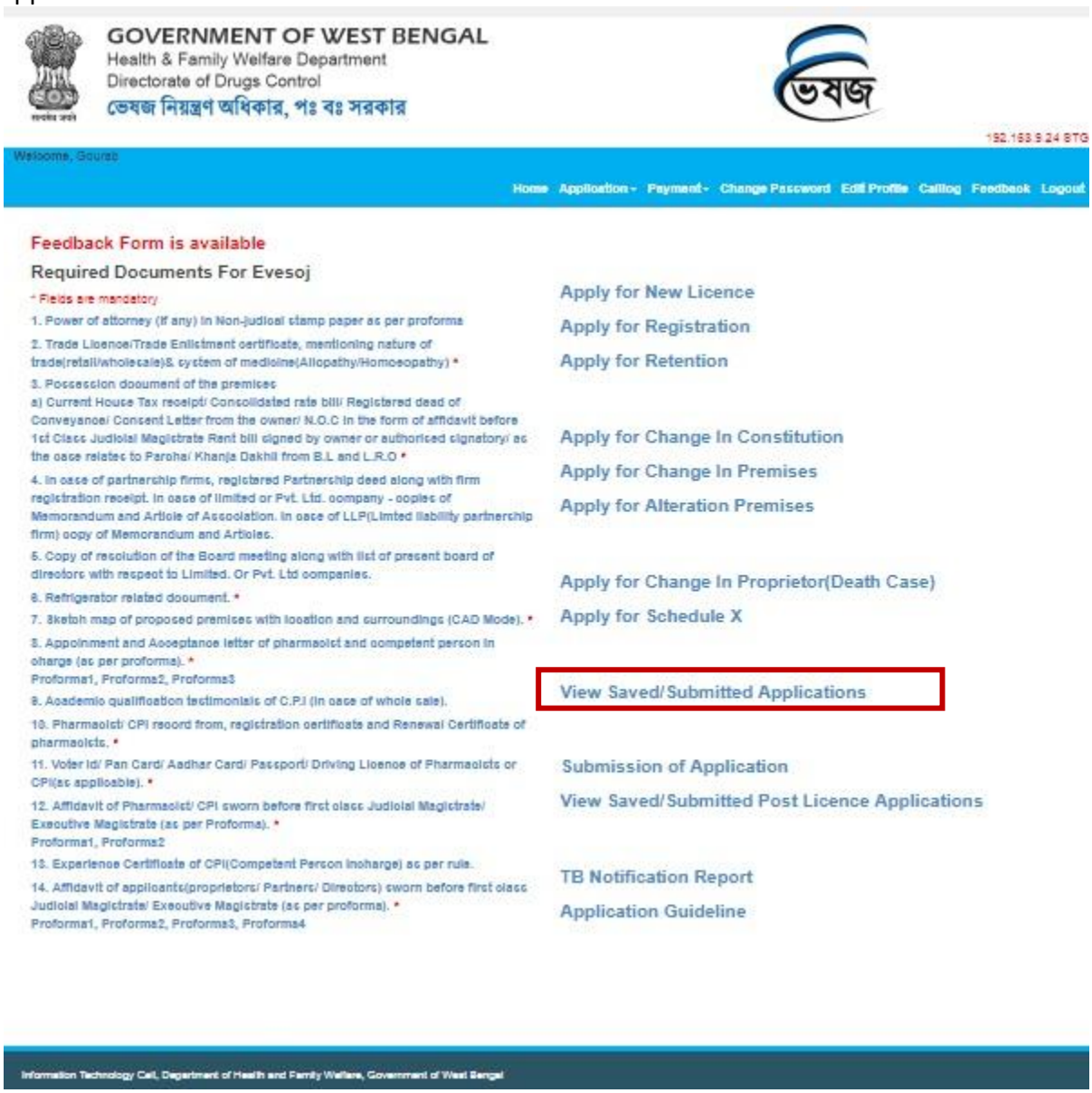
4. Once found the user will click on the Action button adjacent to it and will select 'Excess Payment' from dropdown. The User will once again will be re directed to payment procedure and GRIPS portal to complete payment.

8.3 Screen Details

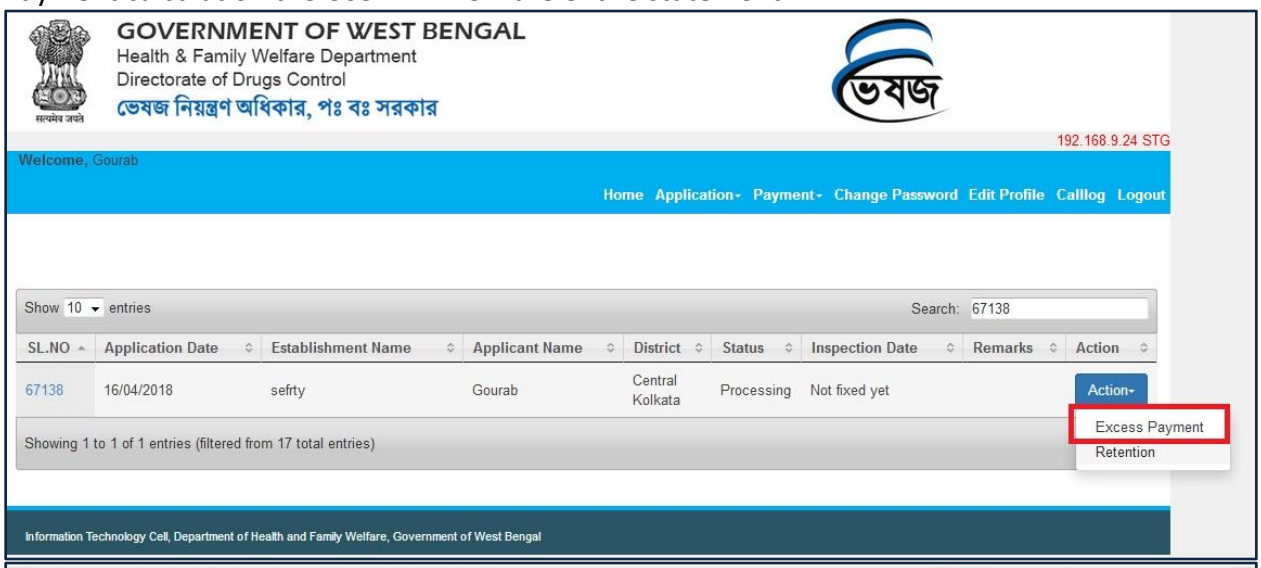
In this case after generation of Form 19 when the user will try to upload the signed and scanned from back into the system it will be blocked asking the user to complete the payment before uploading the form.

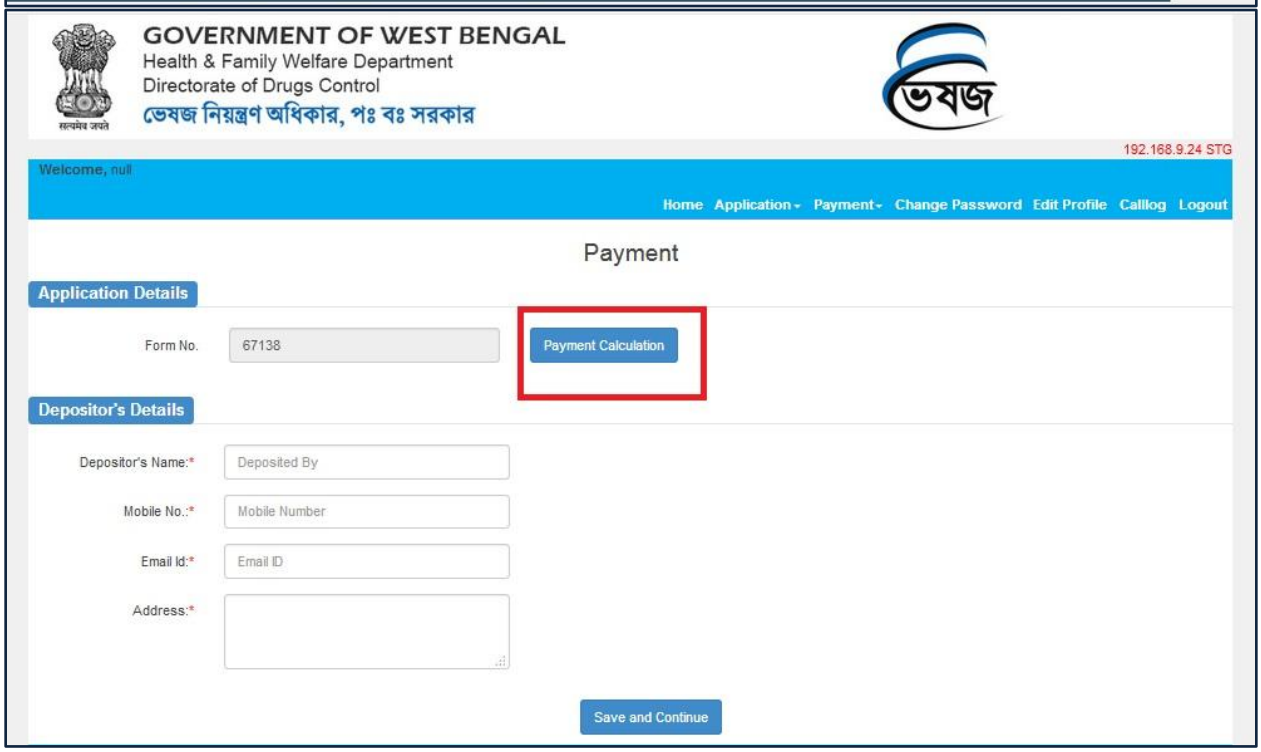


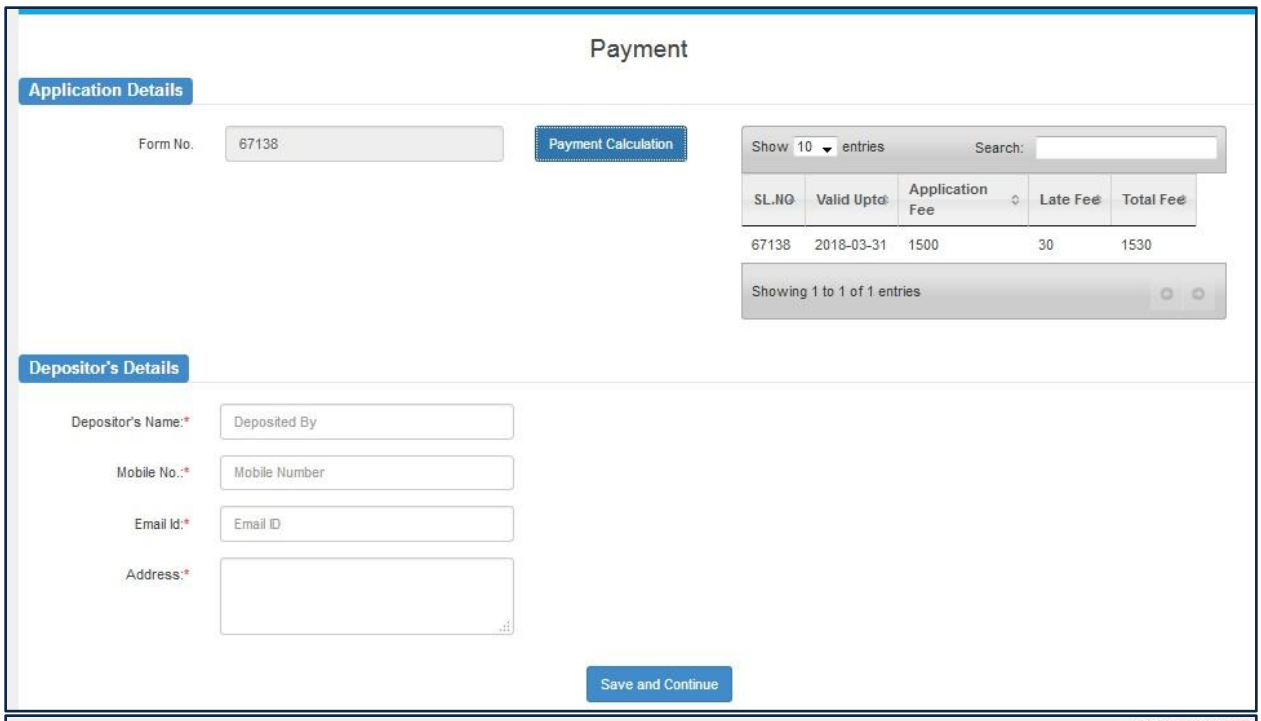
It is then the User will go back to the home page and click on view submitted applications. The User will arrive at Submitted Applications page where he/she will view a list of submitted applications.

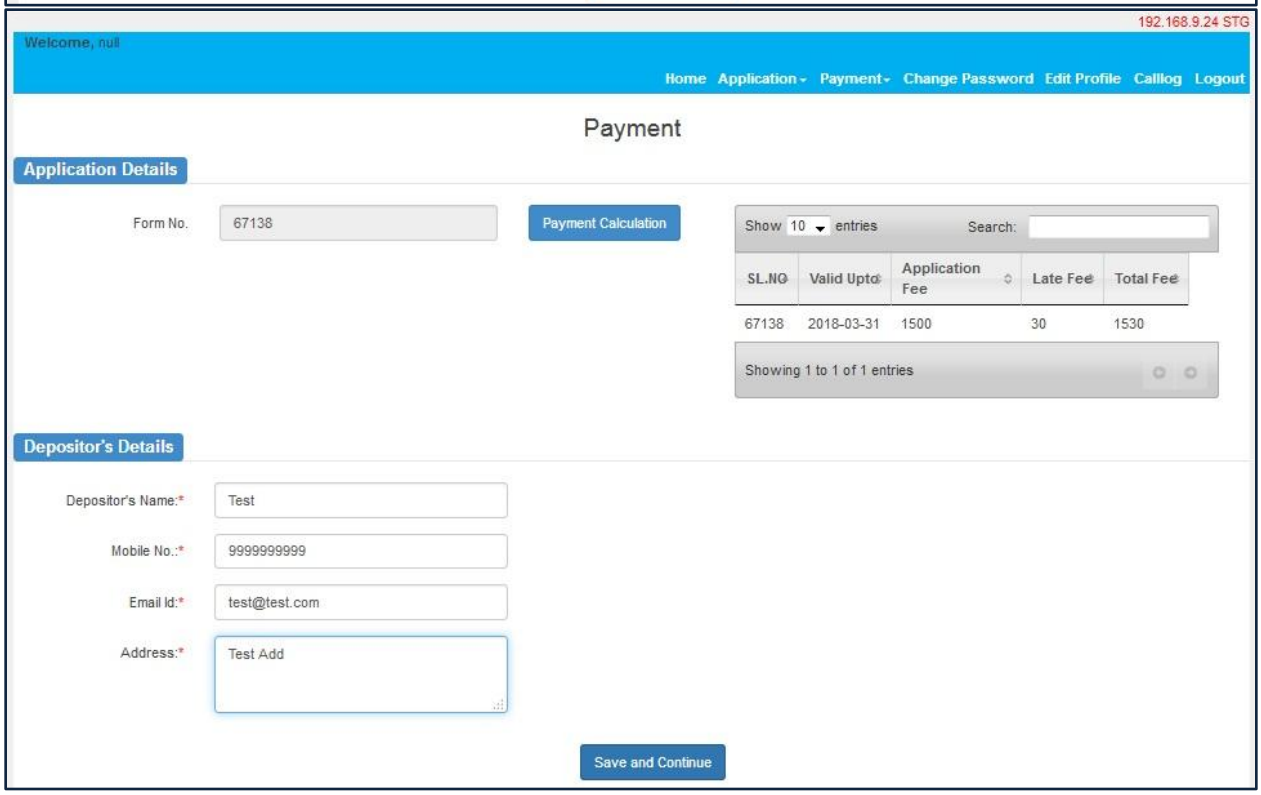


The user can find out the respective application by searching with the reference number. The user will see that in the payment status it is written as processing. Once found the user will click on the Action button adjacent to it and will select 'Excess Payment' from dropdown. The User will be navigated to Payment details screen where the User will enter Application and Depositor's details. A new feature has been added that is 'Payment Calculation'. On clicking Payment calculation the User will view the entire statement.

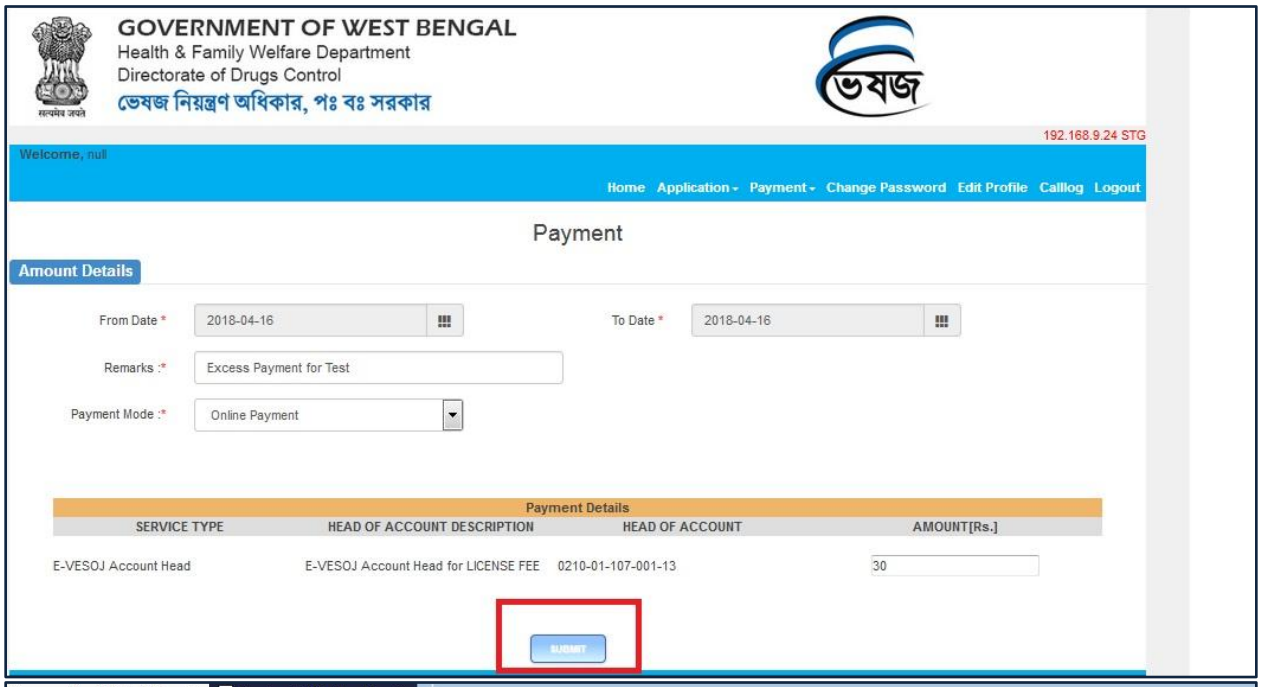


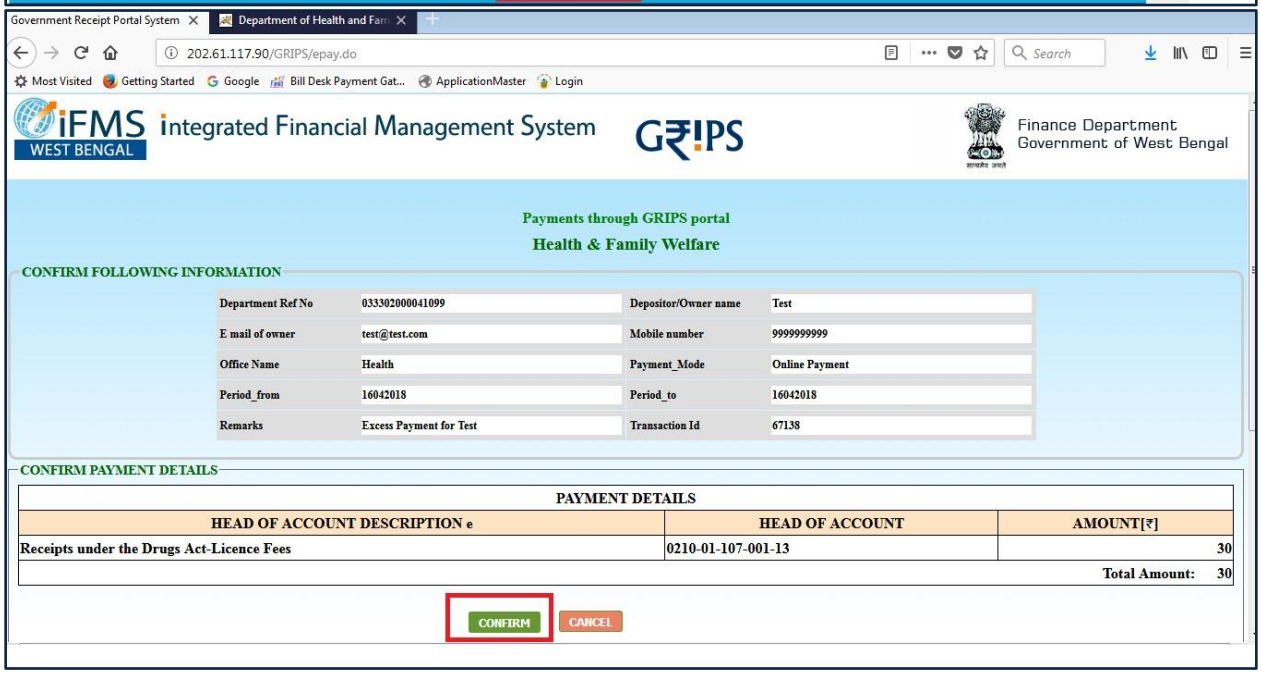



Payment
Application Details
Form No.
67138
Payment Calculation
Show 10 entries
Search:
SL.NO
Valid Upto
Application Fee
Late Fee
Total Fee
67138
2018-03-31
1500
30
1530
Showing 1 to 1 of 1 entries
Depositor's Details
Depositor's Name:*
Deposited By
Mobile No.:*
Mobile Number
Email Id:*
Email ID
Address:*
Save and Continue


192.168.9.24 STG
Welcome, null
Home
Application
Payment
Change Password
Edit Profile
Calllog
Logout
Payment
Application Details
Form No.
67138
Payment Calculation
Show 10 entries
Search:
SL.NO
Valid Upto
Application Fee
Late Fee
Total Fee
67138
2018-03-31
1500
30
1530
Showing 1 to 1 of 1 entries
Depositor's Details
Depositor's Name:*
Test
Mobile No.:*
9999999999
Email Id:*
test@test.com
Address:*
Test Add
Save and Continue

The User will once again will be re directed to payment procedure and GRIPS portal to complete payment.

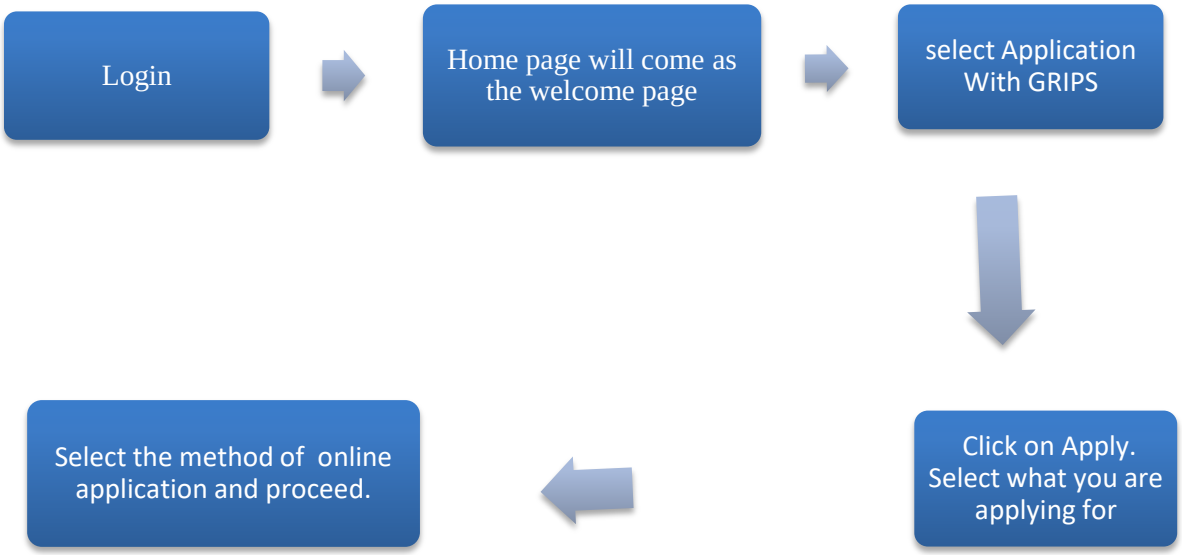




9 Apply for New License

You will get this option after selecting Application from menu ribbon after login. Here, you have to Click Application with GRIPS.

9.1 Process Flow



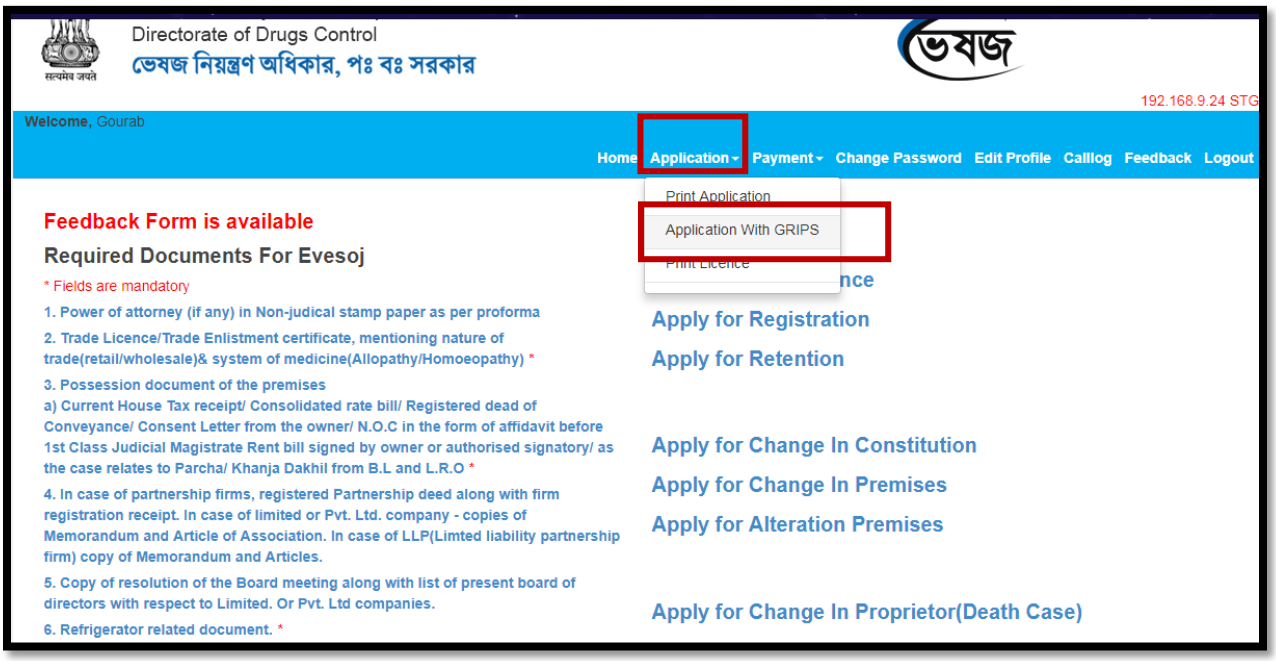
9.2 Detailed Steps

1. Login to the application
2. Home page will come as the welcome page.
3. Click on for Application and select Application with GRIPS.
4. Click on Apply.
5. Select what you are applying for.
6. Select the method of online application and proceed.

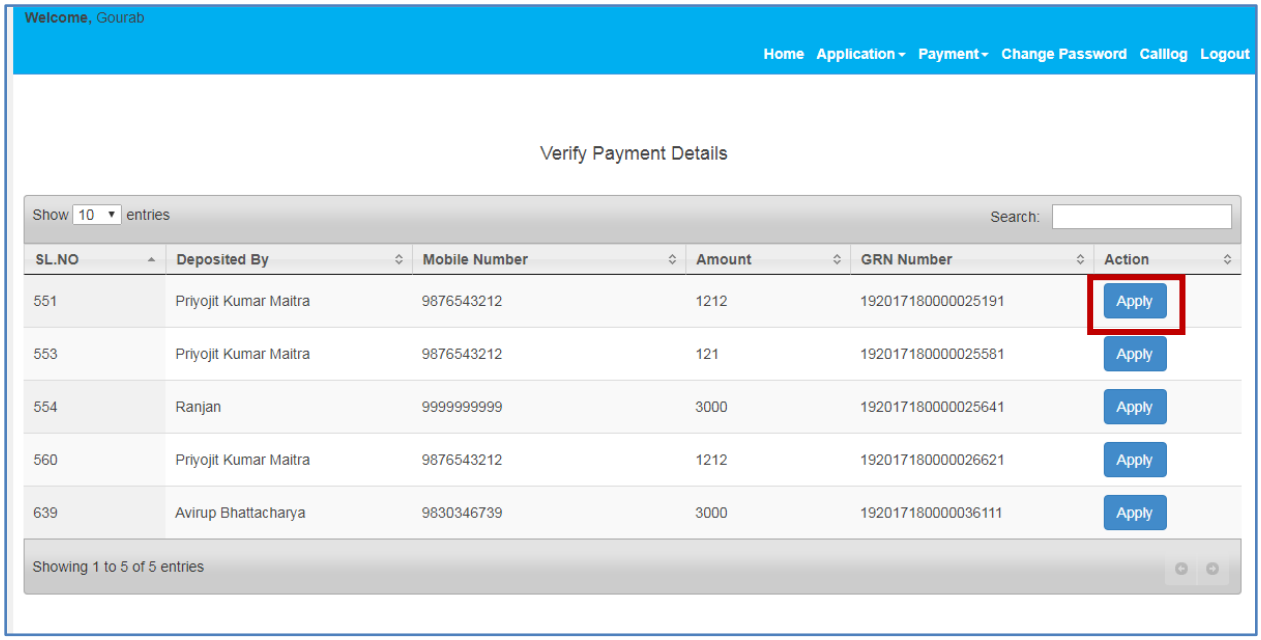
9.3 Screenshot View

Log in to the application. Home page will come as the welcome page.

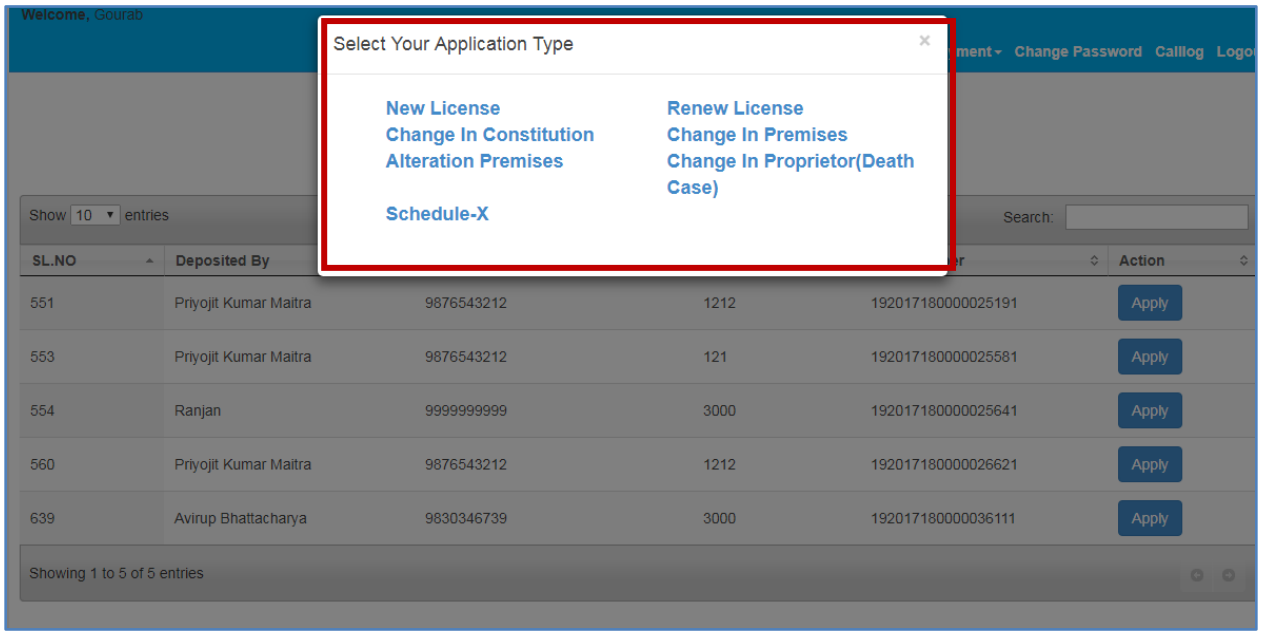
Click on for Application and select Application with GRIPS.



Click on Apply.



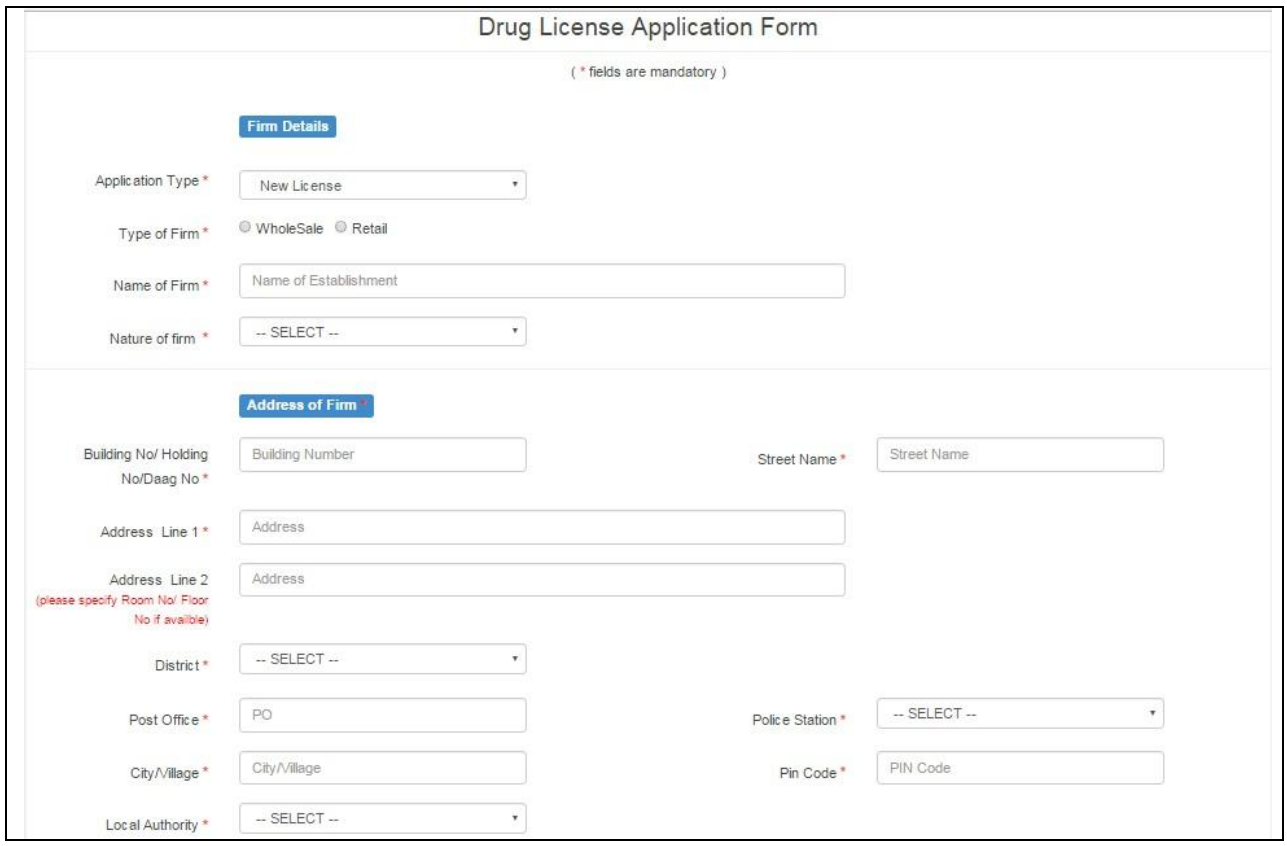
Select what you are applying for.



Detailed Steps:

Apply from Online.

In the first part of online form fill up user have to fill up all the mandatory fields and click on 'next' button.



Contact Details of establishment

Email ID * Email

Landline Landline (ex:033-xxxx-xxxx)

Mobile * Mobile (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted

Modification of Credentials* Not Applicable

Service Details

Categories of drugs to be sold * -- SELECT --

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises Yes No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory

Actual floor space area*(Min 108 sq.ft) sqft.

Height from floor to ceiling ft.

Trade License* Applied for License Available

NEXT

After completing first part of the application form user have to enter all the additional information form for grant of licenses to Sell Drug

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). *

2. Nature of Ceiling * -- SELECT --

3. Trade Licences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * -- SELECT --

7. Is it for an application due to change in constitution of a Licensed Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirIng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

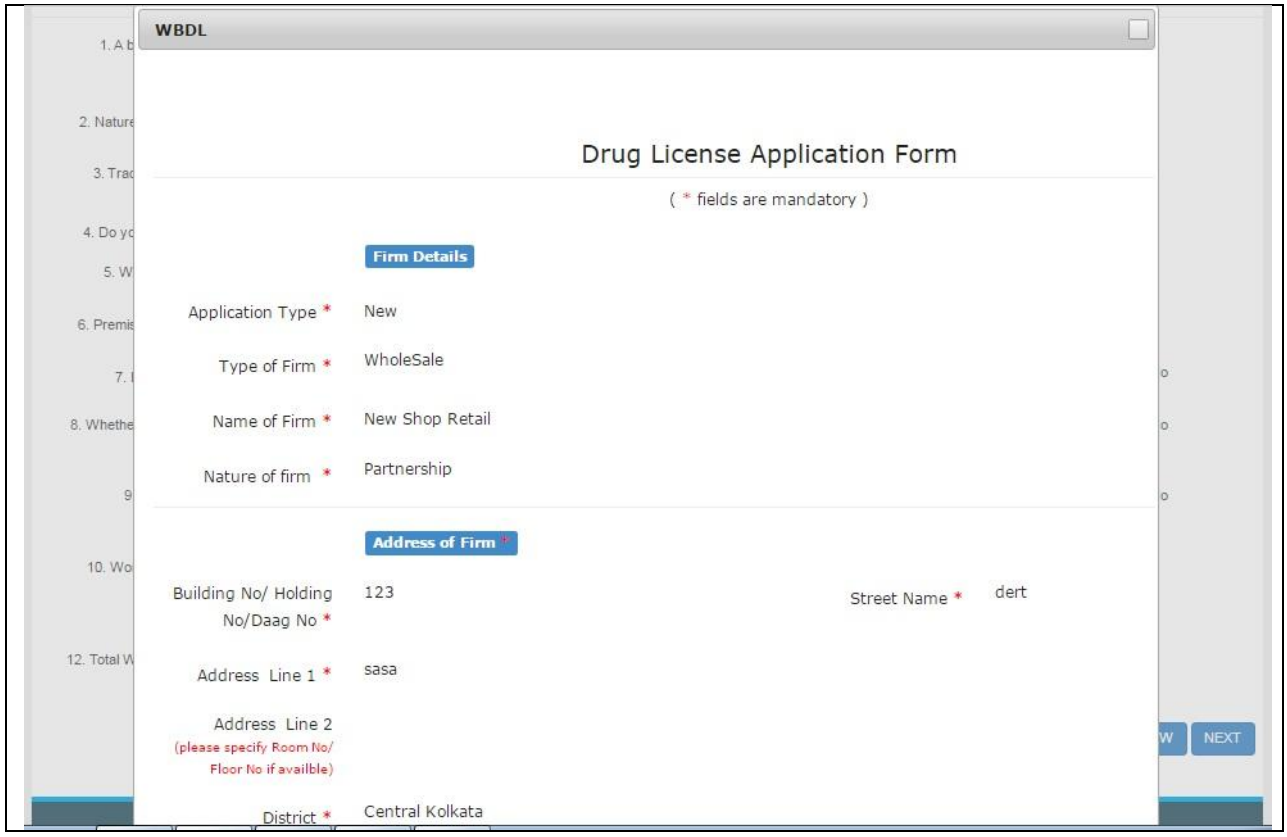
10. Working Hour Working Hours

11. Weekly Closing Day Weekly Closing Day (Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) Total Working days

PREV PREVIEW NEXT

User can preview the field up application form before moving to next step. User can rectify his fields if user mistakes some fields.



Information Tec

District * Central Kolkata

Post Office * Kolkata GPO

Police Station * hget

City/Village * Kolkata

Pin Code * 700001

Local Authority * KMA

Contact Details of establishment

Email ID * banerjee.gourab08@gmail.com

Landline 11111111111

Mobile * 9999999999

Qualification of the person responsible for operation if granted vsdf

Modification of Credentials* Not Applicable

Service Details

Categories of drugs to be sold * Biological_And_Non-Biological

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises Yes

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory This is test

Actual floor space area *(Min 108 sq.ft) 109

Height from floor to ceiling 11

Trade License* Available

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * ew

2. Nature of Ceiling * rcc

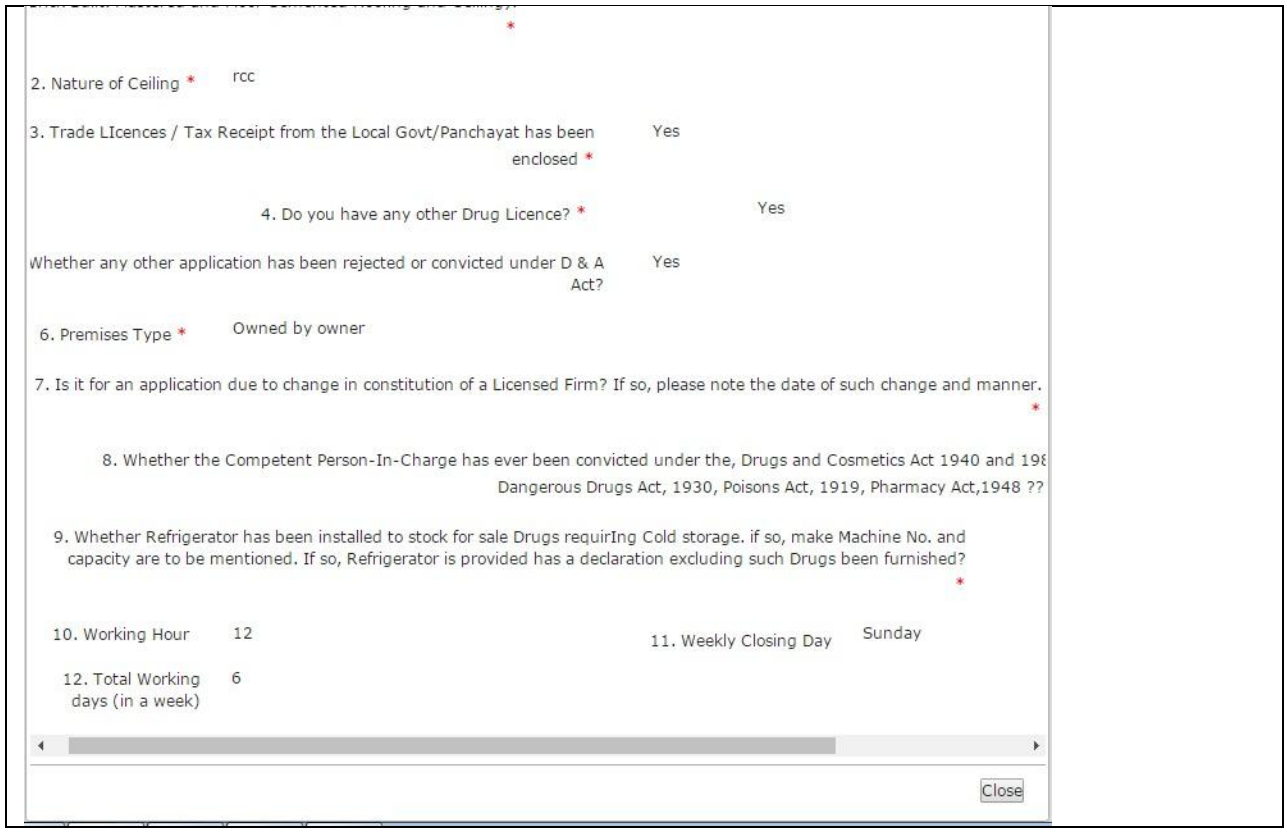
3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes

4. Do you have any other Drug Licence? * Yes

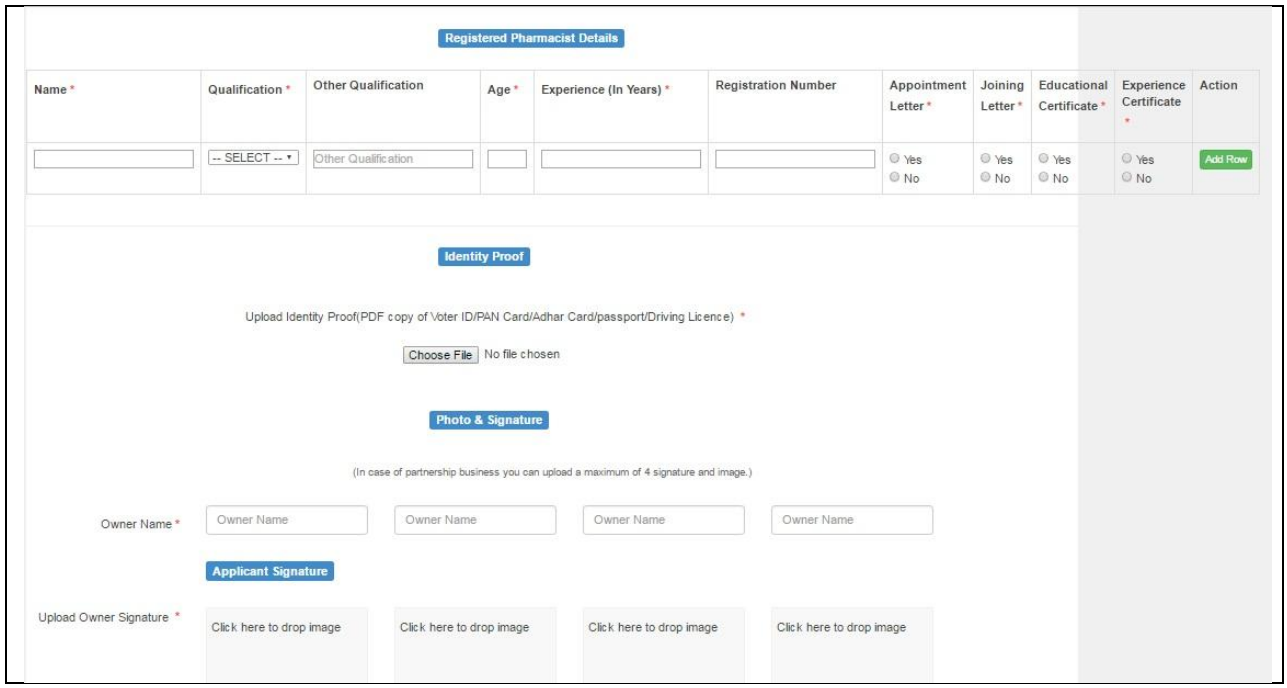
5. Whether any other application has been rejected or convicted under D & A Act? Yes

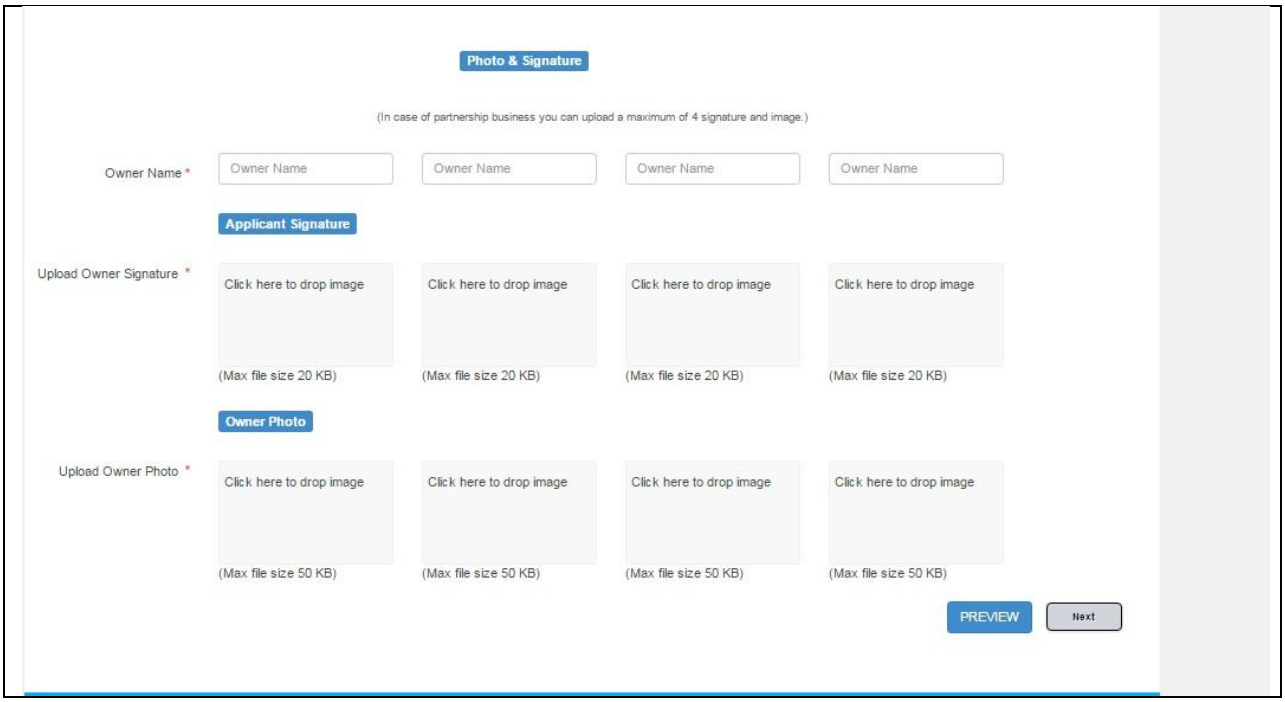
6. Premises Type * Owned by owner

7. Is it for an application due to change in constitution of a Licensed Firm? If so, please note the date of such change and mann



After checking preview of the first 2 page of the filled up application form, user will click on next button and it will redirect to the 3rd page of the application form where user have to provide the staff and owner details along with owners picture and signature.





User can also preview the section before clicking on next button as shown in the screenshot. It will view the last 3 page. User can edit only the current page before moving to last page.

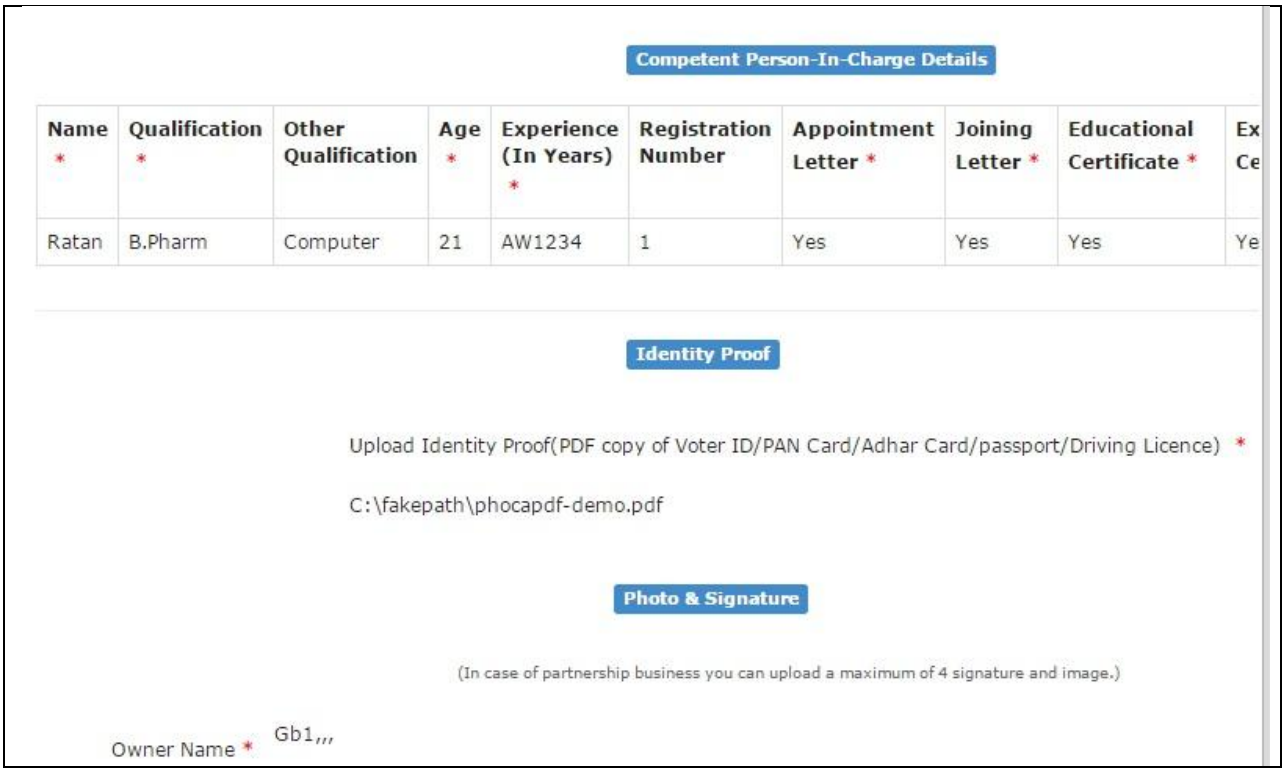
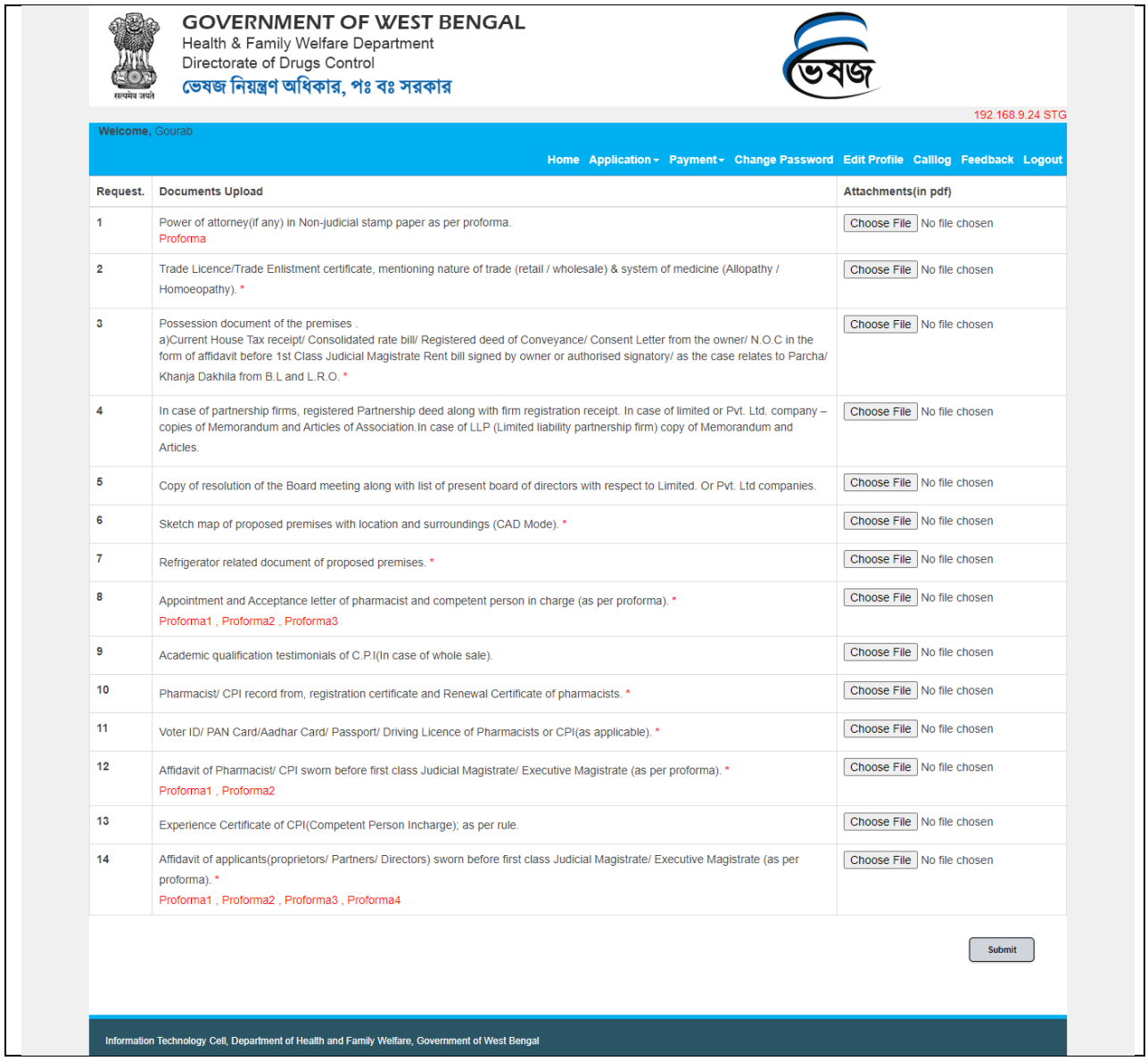


Photo & Signature
(In case of partnership business you can upload a maximum of 4 signature and image.)
Owner Name *
Gb1,,,
Applicant Signature
Upload Owner Signature *
Owner Photo
Upload Owner Photo *
Close

User will click on next page and it will redirect to the last page of application document where user will upload all the necessary documents as shown in below screenshot. User can only upload the document which are marked mandatory (*) there.



GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

192.168.9.24 STG

Welcome, Gourab

Home Application Payment Change Password Edit Profile Calllog Feedback Logout

Request.	Documents Upload	Attachments(in pdf)
1	Power of attorney(if any) in Non-judicial stamp paper as per proforma. Proforma	Choose File No file chosen
2	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy). *	Choose File No file chosen
3	Possession document of the premises . a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O. *	Choose File No file chosen
4	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
5	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.	Choose File No file chosen
6	Sketch map of proposed premises with location and surroundings (CAD Mode). *	Choose File No file chosen
7	Refrigerator related document of proposed premises. *	Choose File No file chosen
8	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3	Choose File No file chosen
9	Academic qualification testimonials of C.P.I(In case of whole sale).	Choose File No file chosen
10	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *	Choose File No file chosen
11	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable). *	Choose File No file chosen
12	Affidavit of Pharmacist/ CPI sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2	Choose File No file chosen
13	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
14	Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4	Choose File No file chosen

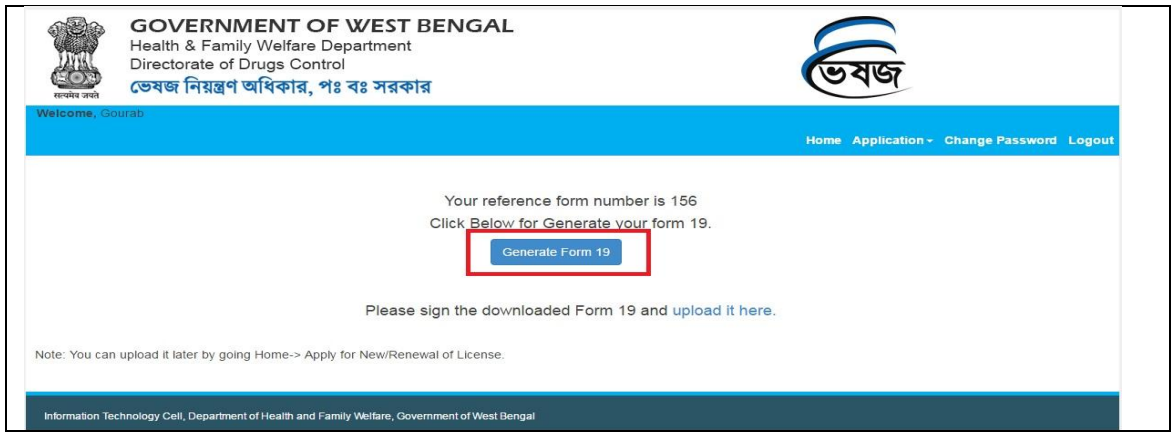
Submit

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

User will click on submit after uploading the entire required document. It will redirect to the below mentioned page where user have to generate form19 with respect to the generated form number.

User will also receive an SMS "**Your form has been submitted successfully. Please upload the signed statutory Form 19 and provide your payment information BRN and GRN No. Your application Number is 156**" to their registered mobile number which User inserted in the application form.

User will generate Form19 and save it in the specific location. After that User will sign the form with the current date.



FORM 19

[See Rule 59(2)]

Application for grant or renewal of a licence to sell, stock, exhibit or offer for sale, or distribute drugs other than those specified in Schedule X

1. I/We* GB1, of Wholesale Medical Shop hereby apply for licence to sell by wholesale/retail drugs specified in Schedules C and C(1) excluding those Specified in Schedule X* and / or drugs other than those specified in Schedules C, C(1) and X to the Drugs and Cosmetics Rules, 1945* and also to operate a pharmacy on the premises situated at:12, Gavin Road, Ananda palli, , P.O.- Kolkata GPO, P.S.- Maidan Thana, Kolkata, Central Kolkata, Pin- 700001

2. ** The sale and dispensing of drugs will be made under the personal supervision of the registered pharmacist / competent person namely:-

Name:Gb

Qualification:B.Pharm

Experience/Registration No:1

Name:

Qualification:

Experience/Registration No:

Name:

Qualification:

Experience/Registration No:

3. Categories of drugs to be sold.

4. *** Particulars of special storage accommodation.

5. A fee of rupees ---------- has been credited to the Government account under the head of account----------

Date :----------

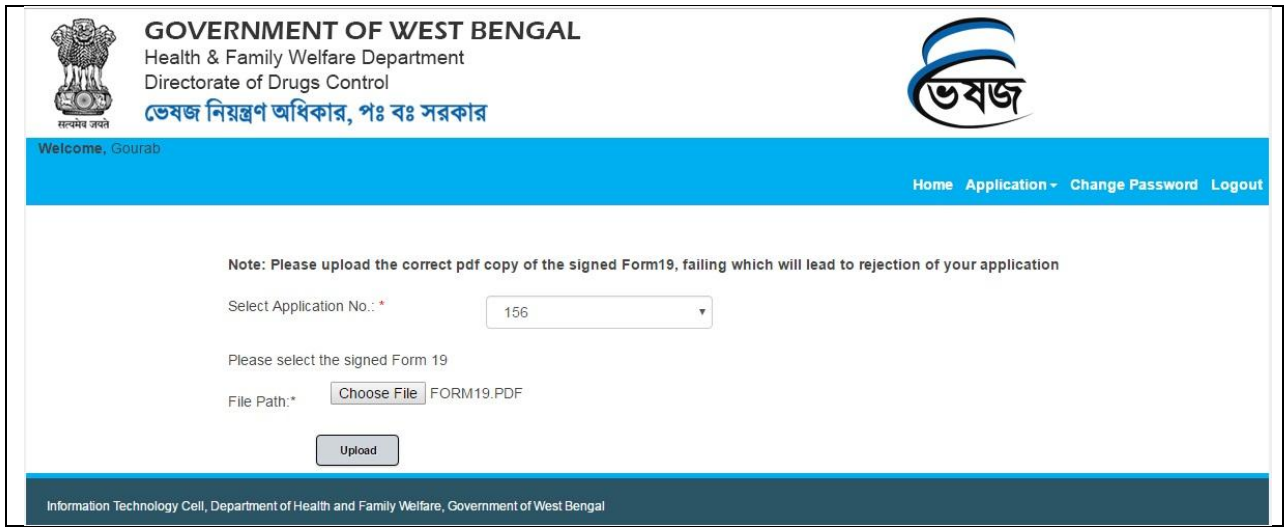
Signature : ----------

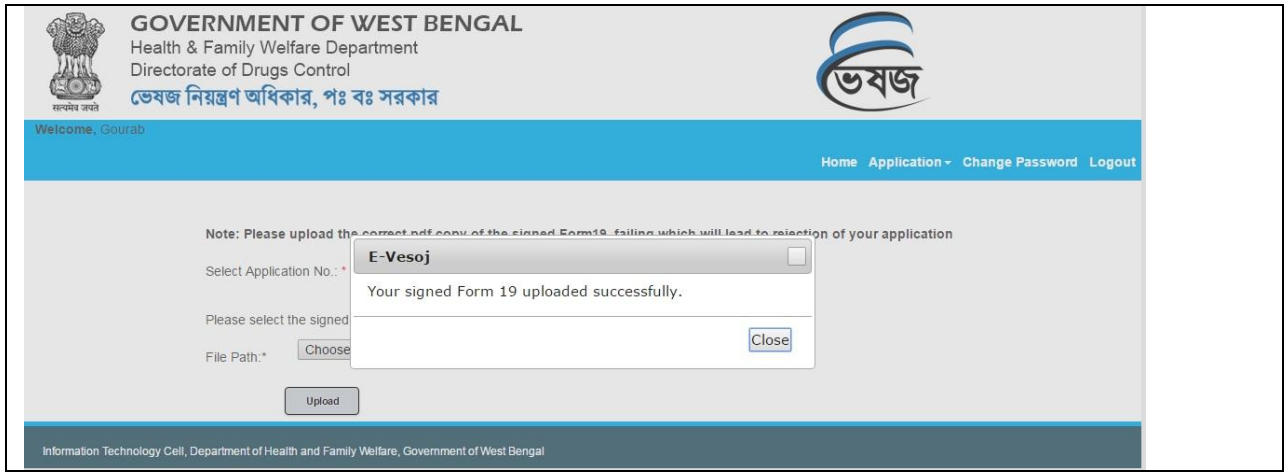
* Delete whichever is not applicable.

** To be deleted if drugs will be sold only by wholesale.

*** Required only if products requiring special storage are to be sold

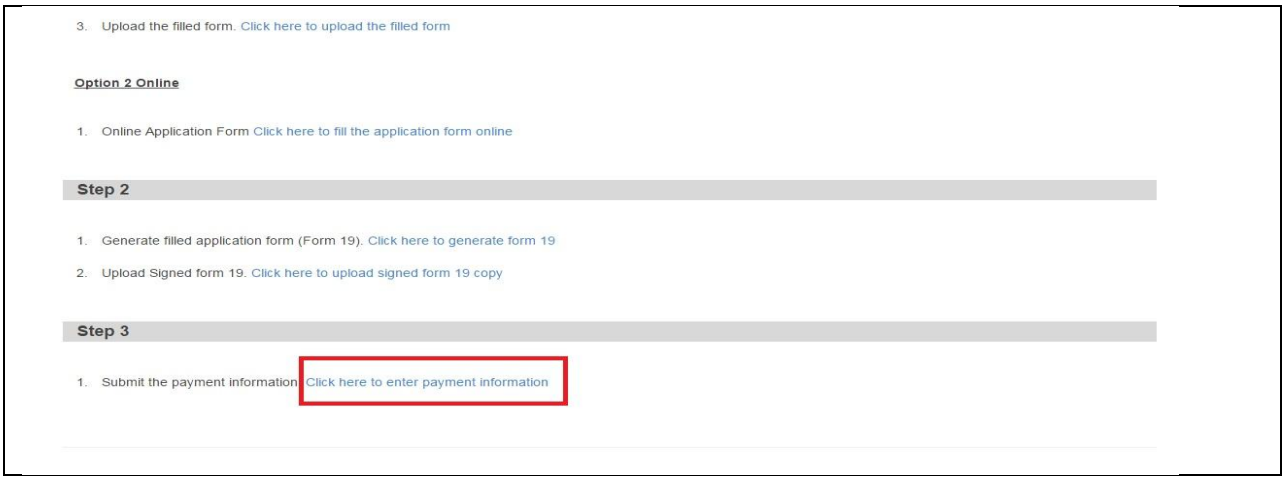
User has to scan the document after inserting their signature and date. After that user will select the form number and Upload the scanned form 19 document. User will receive a popup that your signed Form 19 is uploaded successfully.



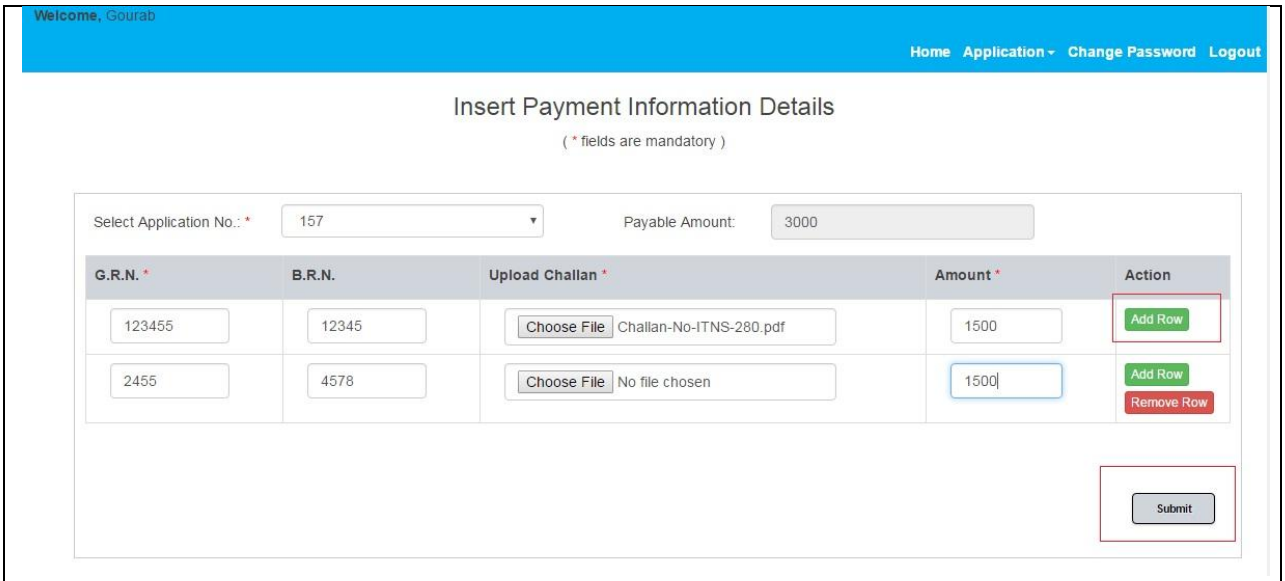


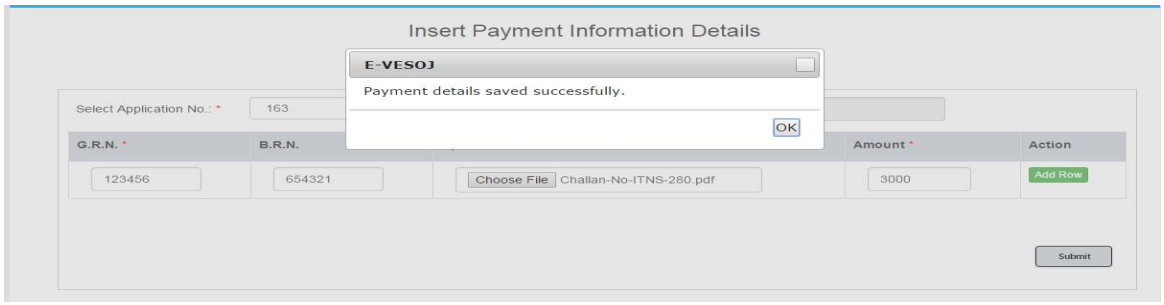
After uploading the signed Form 19 a pop will appear with the text “Your signed Form 19 uploaded successfully”. Upon clicking on close button the page will redirect to the home page.

User will again click on “Apply for New license” and move to step 3 and click on “Click here to enter payment information”



Submit the payment information. Click here to enter payment information



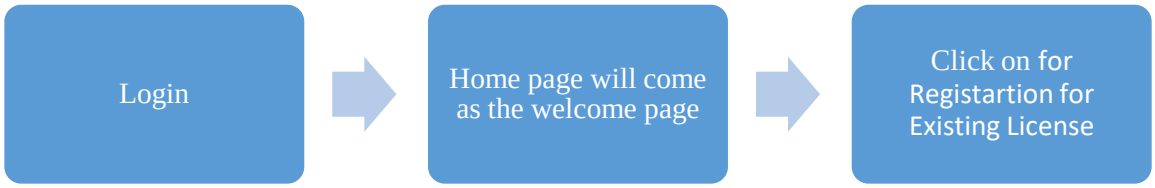


After submit a popup will occur that Your payment details saved successfully. Upon clicking on close button the page will redirect to Home page

User will also receive a SMS to their registered mobile phone which is as follows:
"**Your process is complete. Await receipt subject to payment verification**"

10 Registration for Existing License

10.1 Process Flow



10.2 Details

This option will allow the user to enter the valid / existing licenses in the system which was given to the user manually (i.e. not from the system). Once you enter this license details in the system, then only it can be retained through system. It can be only being done in online.

10.3 Detailed Steps

- Login to the application
- Home page will come as the welcome page.
- Click on for Registration for Existing License.
- Fill up the form with valid details of existing licenses which is not system generated.

10.4 Screenshot View

User will click on “Registration for Existing License”.

User has to fill up the form with respect to the existing license and its application details

Registration Form For Existing Offline Holders

(* fields are mandatory)

Firm Details

Application Type * Paper Licence

Type of Firm * WholeSale Retail

Name of Firm * GB_Pap_test

Nature of firm * Partnership

Address of Firm

(Please provide correct address. All communication will be done in this address.)

Building No/ Holding No/Daag No * 23

Street Name * Test Street

Address Line 1 * Test Area

Address Line 2 (please specify Room No/ Floor No if availble) Address

District * Central Kolkata

Post Office for Kolkata * Kolkata GPO

Police Station for Kolkata * Test Thana

City/Village * Kolkata

Pin Code * 700001

Local Authority * Others

Municipality

specify Municipality/Corporation/Panchayat Authority Name

Contact Details of establishment

Email ID * test@test.com

(Please give authentic Email Id. All communication will be done in this Email Id.)

Landline 03324478787

(ex:033-xxxx-xxxx)

Mobile * 9999999999

(Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted wdw

Service Details

Categories of drugs to be sold * Both

Licence Number Bio * BIO123123

Licence Number NonBio * NBO123123

Licence Issue Date * 02-11-2015

Licence Valid Upto * 10-03-2017

Licence Certificate Date 07-03-2017

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises ◉ Yes ○ No

Actual floor space area* 109 sqft.

Height from floor to ceiling 11 ft.

NEXT

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

User updates the required fields and click on next

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * khklj

2. Nature of Ceiling * RCC

3. Trade Licences / Trade Enlistment Certificate * (•) Yes ( ) No

4. Do you have any other Drug Licence? * (•) Yes ( ) No

5. Whether any other application has been rejected or convicted under D & A Act? (•) Yes ( ) No

6. Premises Type * Owned by Applicant

7. Whether Refrigerator has been installed to stock for sale Drugs requiring Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * (•) Yes ( ) No

8. Working Hour 12

9. Weekly Closing Day Sunday

(Please provide any day of the week. like Sunday,Monday.....)

10. Total Working days (in a week) 6

PREV PREVIEW NEXT

User will preview the fill up form by clicking on preview button.

Home Application Change Password Logout

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * eqw

2. Nature of Ceiling * RCC

3. Trade Licences / Trade Enlistment Certificate * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Owned by Applicant

7. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

8. Working Hour 13

9. Weekly Closing Day Monday

(Please provide any day of the week. like Sunday,Monday.....)

10. Total Working days (in a week) 6

PREV PREVIEW NEXT

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

WBDL

Drug License Application Form

(* fields are mandatory)

Firm Details

Application Type * PaperLicence

Type of Firm * WholeSale

Name of Firm * Medical paper Shop

Nature of firm * LLP

Address of Firm *

Building No/ Holding No/Daag No * 24

Street Name * Desk Street

Address Line 1 * Raman More

Address Line 2 (please specify Room No/ Floor No if availble)

District *	Central Kolkata		
Post Office *	Kolkata GPO	Police Station *	Testr
City/Village *	Kolkata	Pin Code *	700009
Local Authority *	KMA		

Contact Details of establishment

Email ID *	banerjee.gourab08@gmail.com		
Landline		Mobile *	9874481064
Qualification of the person responsible for operation if granted	as		
Modification of Credentials*			

Service Details

Categories of drugs to be sold *	Biological_And_Non-Biological
Licence Number Bio *	BIO098
Licence Number NonBio *	NBO098

Licence Issue Date *	01-02-2016
Licence Valid Upto *	07-03-2017
Licence Certificate Date	01-03-2017

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory			
Actual floor space area *(Min 108 sq.ft)	123	Height from floor to ceiling	11

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). *	eqw
2. Nature of Ceiling *	rcc
3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed *	Yes

4. Do you have any other Drug Licence? * Yes

5. Whether any other application has been rejected or convicted under D & A Act? Yes

6. Premises Type * Owned by owner

7. Is it for an application due to change in constitution of a Licensed Firm? If so, please note the date of such change and mann

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948

9. Whether Refrigerator has been installed to stock for sale Drugs requirIng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? *

10. Working Hour 13

11. Weekly Closing Day Monday

12. Total Working days (in a week) 6

Close

After preview if User has nothing to edit he can move to next step by clicking on “next “Button”. I t will move to 3rd phase. Here staff details and owner details are specified. At least one user image and signature is mandatory here.

Registered Pharmacist Details

Name *	Qualification *	Other Qualification	Age *	Experience (In Years) *	Registration Number	Appointment Letter *	Joining Letter *	Educational Certificate *	Experience Certificate *	Registration Certificate *	Action
Sam	B. Pharm	Computer	21	1	ASD345	Yes No	Yes No	Yes No	Yes No	Yes No	Add Row

Identity Proof

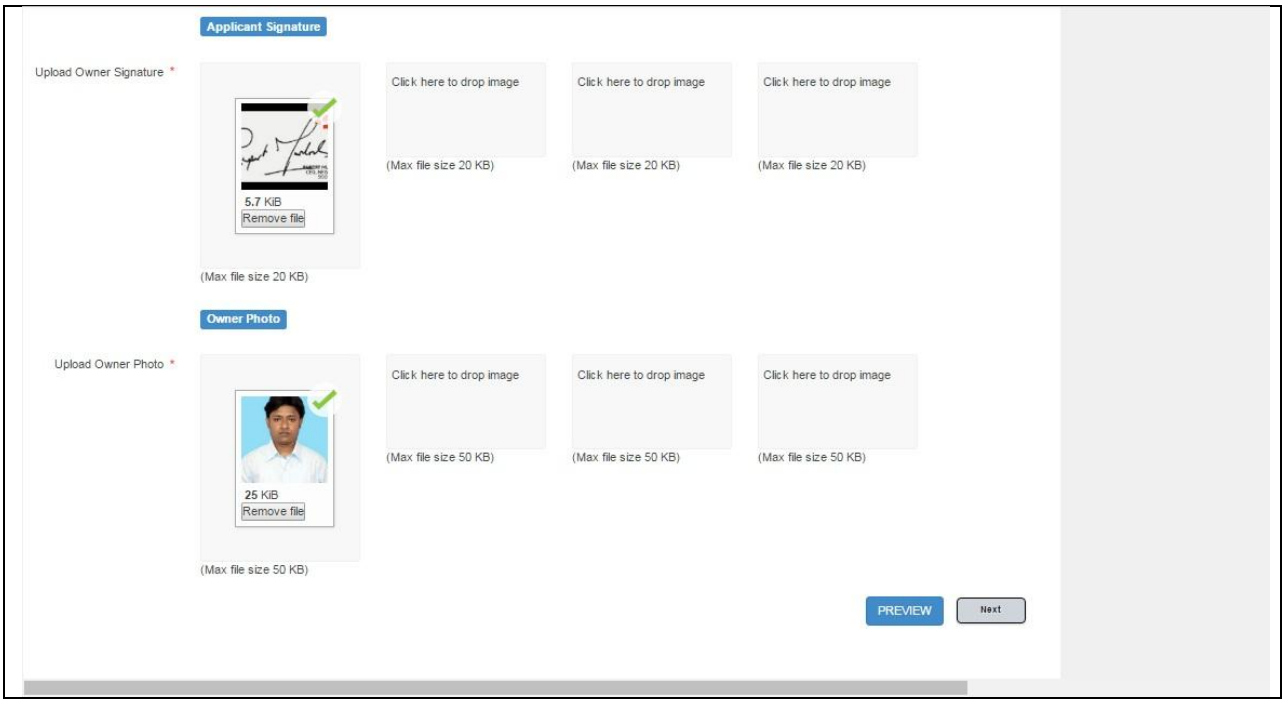
Upload Identity Proof(PDF copy of Voter ID/PAN Card/Adhar Card/passport/Driving Licence) *

Choose File demo.pdf

Photo & Signature

(In case of partnership business you can upload a maximum of 4 signature and image.)

Owner Name * David | Owner Name | Owner Name | Owner Name



After filling up 3rd phase of the form user can preview the entire 3 pages of fill up application form and can edit the current page if required.

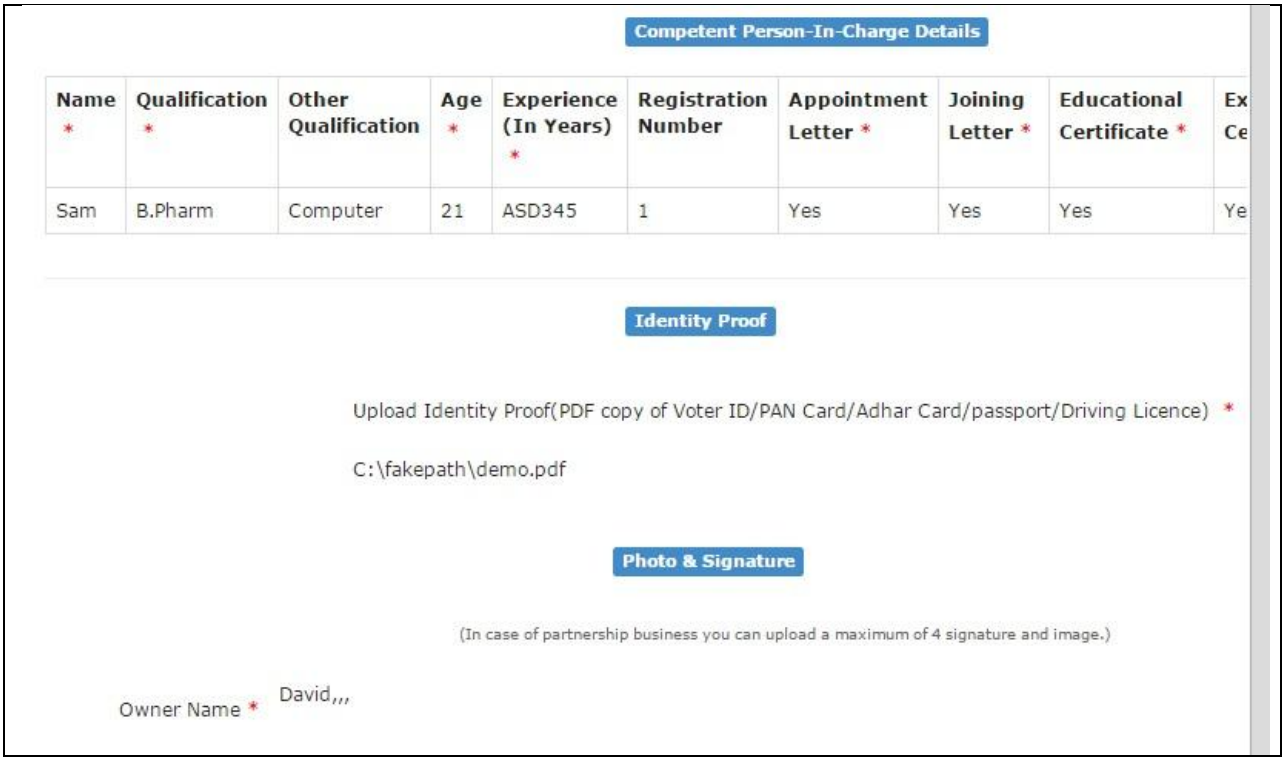


Photo & Signature

(In case of partnership business you can upload a maximum of 4 signature and image.)

Owner Name * David,,,

Applicant Signature

Upload Owner Signature *

Owner Photo

Upload Owner Photo *

Close

After filling up 3rd phase of the form the user will have to click next button which will redirect him/her to the final page where the user will have to upload all his documents.

GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

192.168.9.24 STG

Welcome, Gourab

Home Application Payment Change Password Edit Profile Calllog Feedback Logout

Request.	Documents Upload	Attachments(in pdf)
1	Power of attorney(if any) in Non-judicial stamp paper as per proforma. Proforma	Choose File No file chosen
2	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy). *	Choose File No file chosen
3	Possession document of the premises . a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O. *	Choose File No file chosen
4	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
5	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.	Choose File No file chosen
6	Sketch map of proposed premises with location and surroundings (CAD Mode). *	Choose File No file chosen
7	Refrigerator related document of proposed premises. *	Choose File No file chosen
8	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3	Choose File No file chosen
9	Academic qualification testimonials of C.P.I(In case of whole sale).	Choose File No file chosen
10	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *	Choose File No file chosen
11	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable). *	Choose File No file chosen
12	Affidavit of Pharmacist/ CPI sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2	Choose File No file chosen
13	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
14	Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4	Choose File No file chosen
15	Last Receipt Certificate. *	Choose File demo.pdf
16	Upload Drug Licence Bio. *	Choose File demoform1.pdf
17	Upload Drug Licence Non Bio. *	Choose File demoform1.pdf

Submit

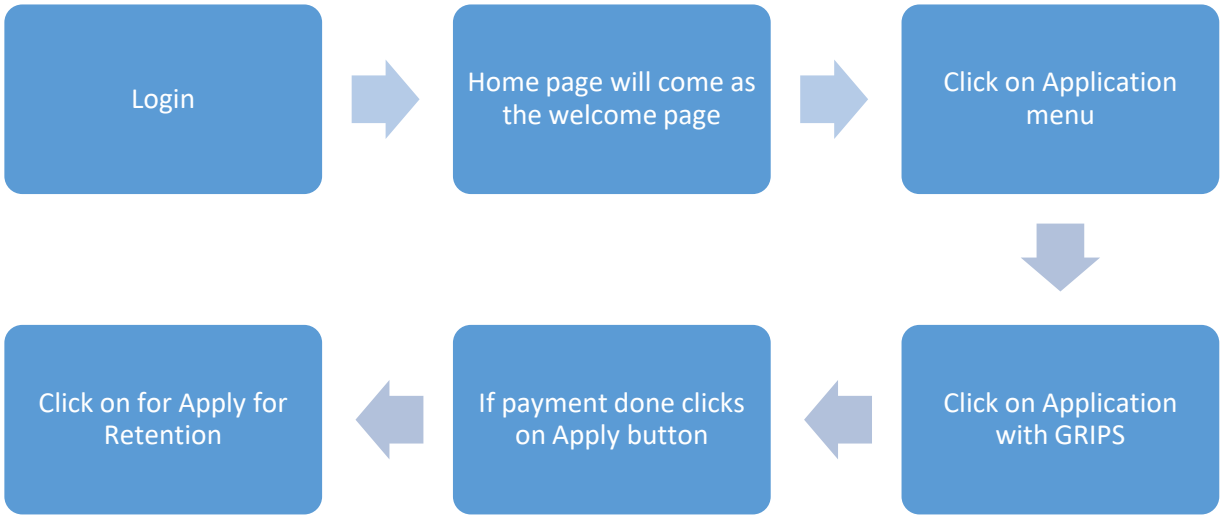
After filling up 3rd phase of the form user have to upload the required document. Previous document if user has submitted previously is optional rest 3 mandatory documents a user has to upload there and they are Upload license receipt, Upload Drug License Bio., Upload Drug License Non Bio. After submit user will receive this below mentioned SMS that "**Your registration form has been submitted successfully. Please wait for approval by LA. Your application number is 158**".

After this step the application will directly submitted to License authority. After LA's approve the application, the old license will placed in the system with the same license number. User will get a SMS "**Your registration application has been approved by LA; you can now apply online for retention. Your application number is 158**".

11. Apply for Retention of License

- Application with GRIPS

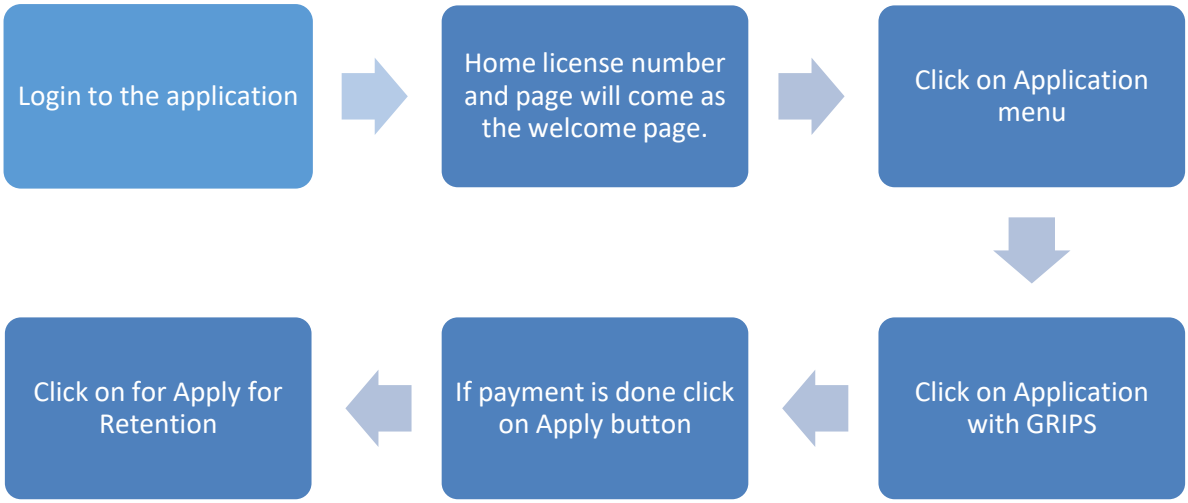
11.1 Process Flow



11.2 Details

This option will allow the user to apply for retention of license / certificate. But for applying for retention, user must enter the license / certificate details in the system for the option “Existing license”. It can be only done online. Once user enter the existing License / Certificate and click on show, all fields will appear automatically in the system. Only few features user can fill up there as rest of the sections are blocked and it cannot be changeable. It can be only applicable after online payments with GRIPS are done.

11.2.1 Process Flow

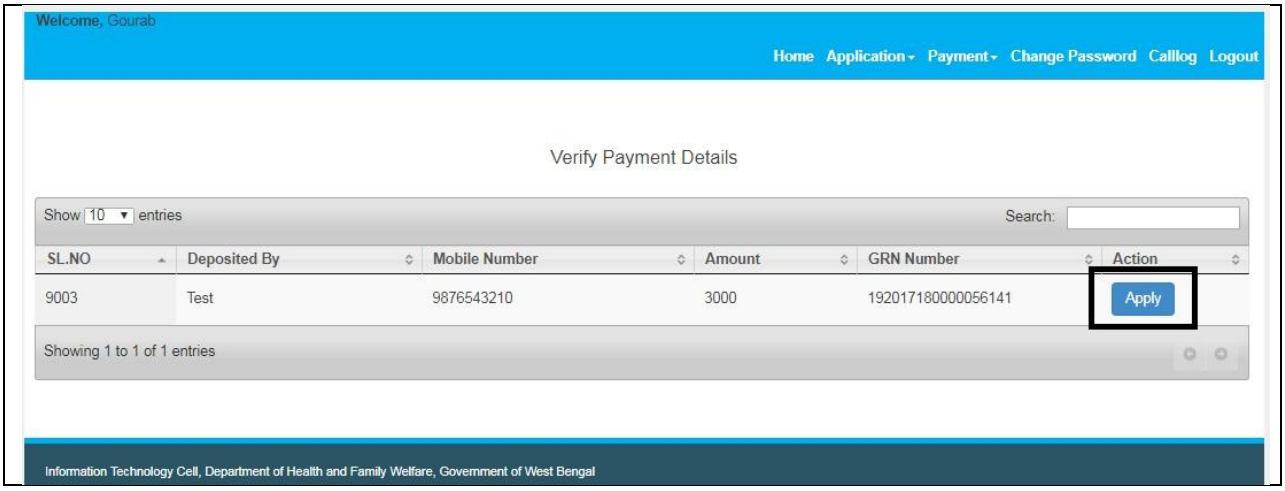


11.2.2 Detailed Steps

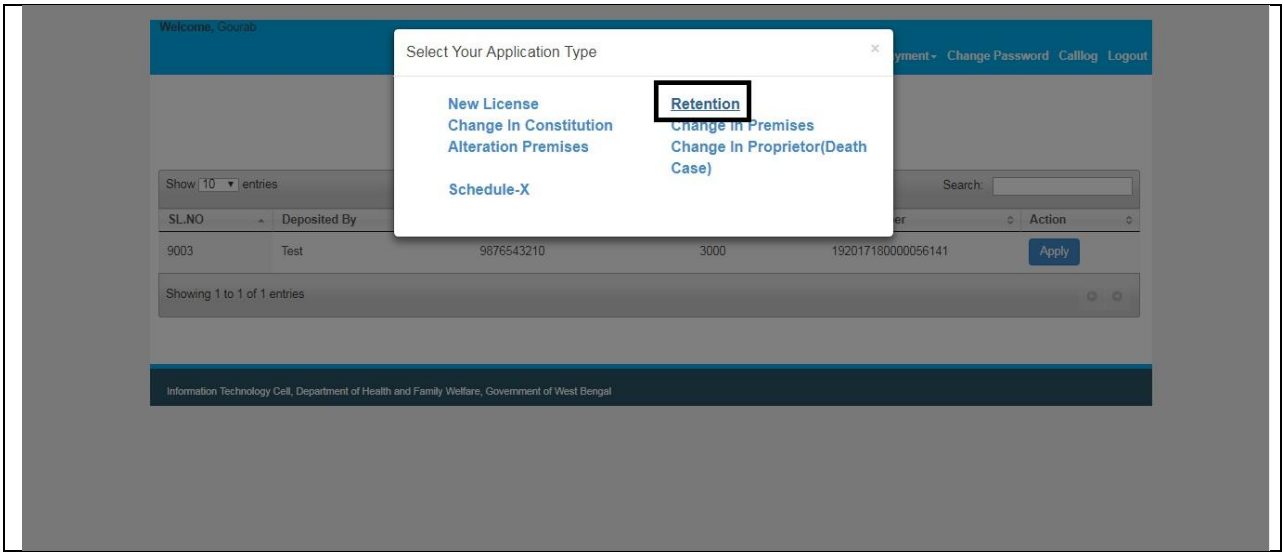
1. Login to the application
2. Home license number and page will come as the welcome page.
3. Click on Application menu
4. Click on Application with GRIPS
5. If payment is done click on Apply button
6. Click on for Apply for Retention

11.2.3 Screenshot View

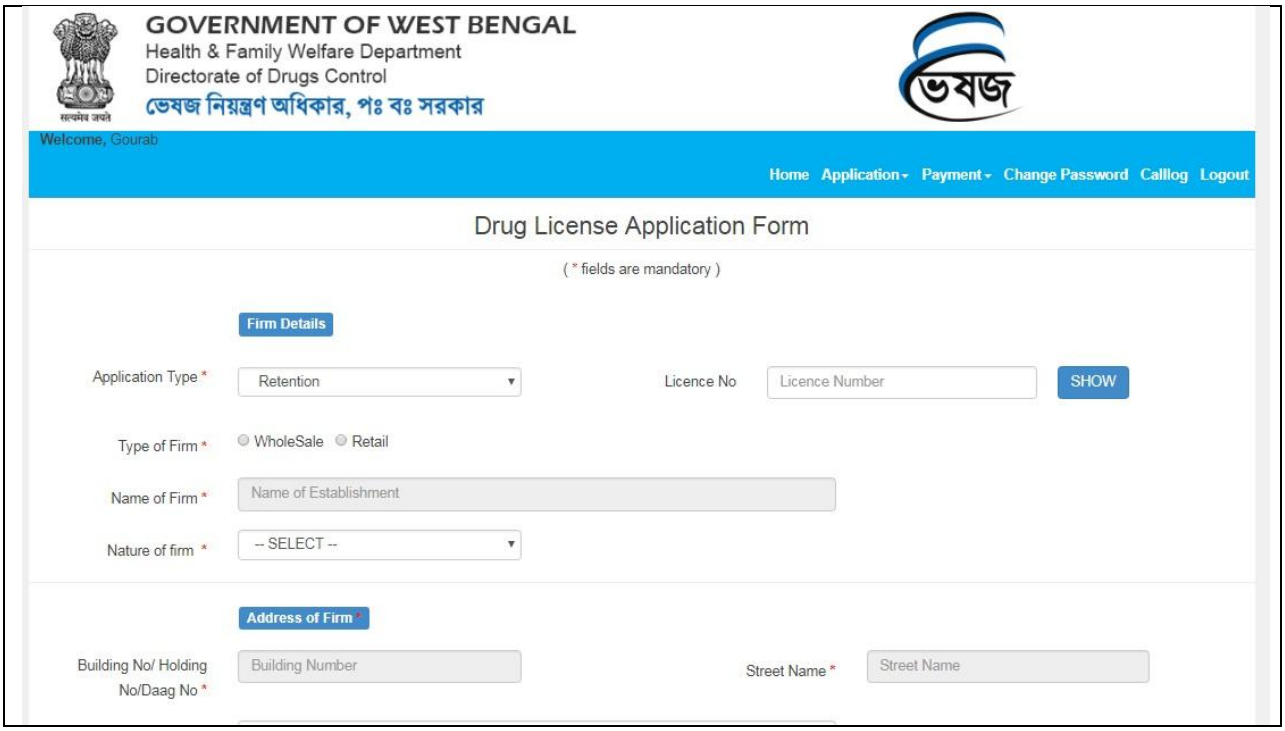
Step 1: User will click on “Application” menu and a drop down will appear. Now click on “Application with GRIPS” button.

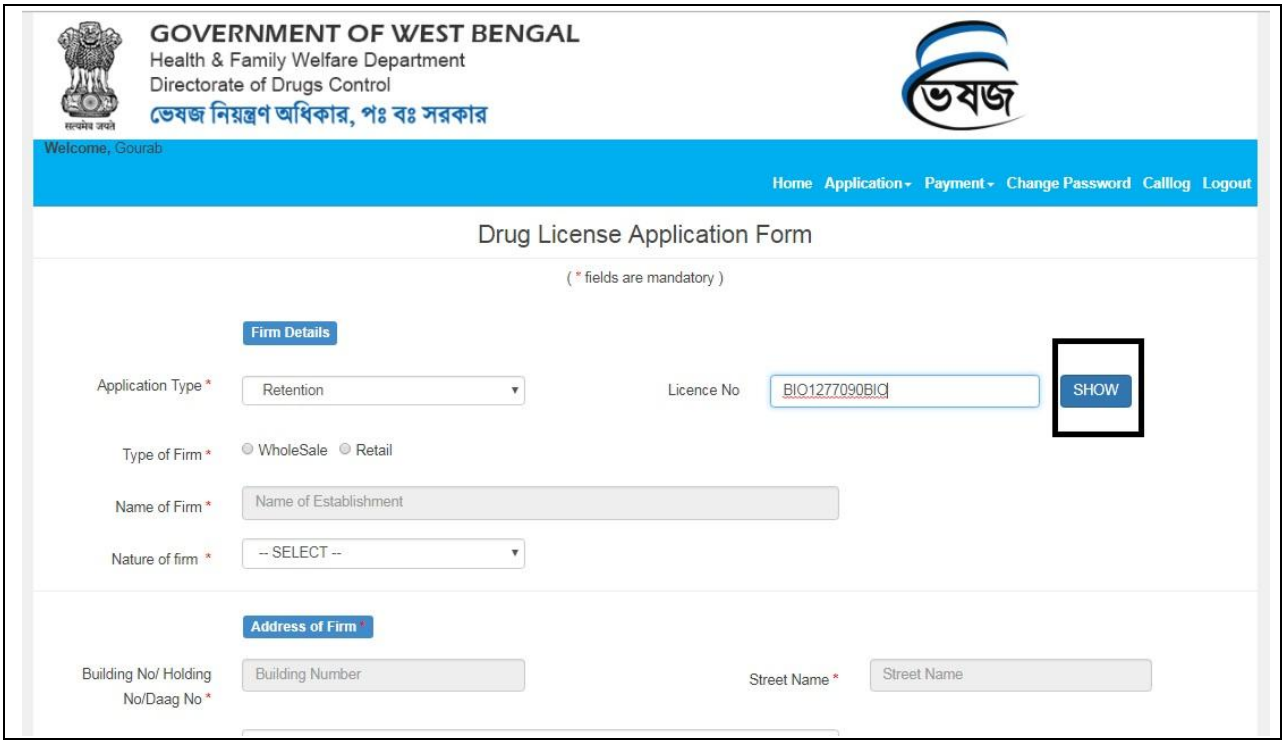


Step 2: User will click “Apply” Button, but this will only show if your only payment is done with respect to the mentioned form number as shown in the screenshot.

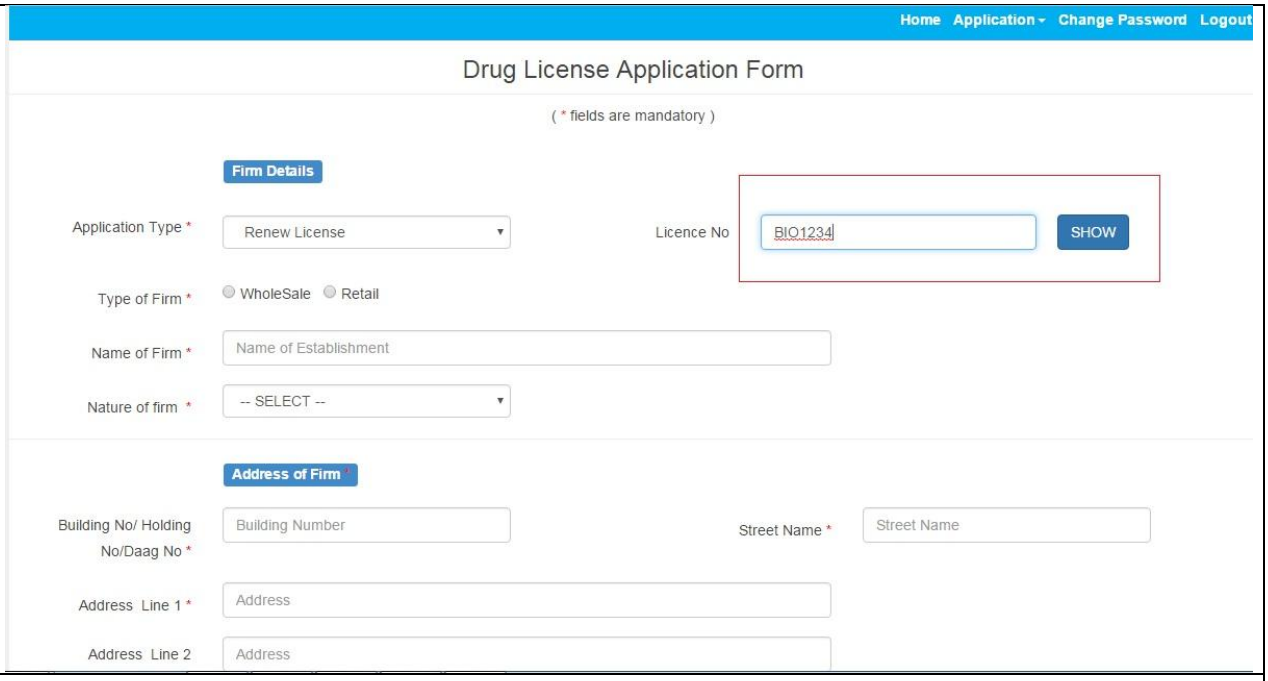


Step 3: Upon clicking on “Apply” button a pop will appear. User will now click on “Retention”





Step 4: Retention form will appear. User will type the License number and click on Show. As shown in the above screenshot. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up. User has to type the License number and click on button “show” as shown below.



Upon clicking on show system will show the populated data of the application form with respect to the License Number.

Drug License Application Form

(* fields are mandatory)

Firm Details

Application Type * : Renew License

Licence No : BIO1234 SHOW

Type of Firm * : WholeSale Retail

Name of Firm * : GBPAP Shop

Nature of firm * : Partnership

Address of Firm

Building No/ Holding No/Daag No * : 12

Street Name * : Ratanlal Street

Address Line 1 * : Ratanlal More

Address Line 2 (please specify Room No/ Floor No if availble) : Address

District * : Central Kolkata

Post Office for Kolkata * : Kolkata GPO

Police Station for Kolkata * : Lalbazar Thana

City/Village * : Kolkata

Pin Code * : 700001

Local Authority * : Others

Contact Details of establishment

Email ID * : banerjee.gourab08@gmail.com

Landline : 21111212 (ex:033-xxxx-xxxx)

Mobile * : 9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted : ewrr

Modification of Credentials* : Not Applicable

Service Details

Categories of drugs to be sold * : Both

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises : Yes No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory :

Actual floor space area*(Min 108 sq.ft) : 109 sqft.

Height from floor to ceiling : 11 ft.

Trade License : Applied for License Available

NEXT

User will click on Next button

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * sa

2. Nature of Ceiling * Temporary Shade over false ceiling

3. Trade Licences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Owned by Applicant

7. Is it for an application due to change in constitution of a Licensed Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 13

11. Weekly Closing Day Monday

(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

PREV PREVIEW NEXT

User will click on next button

Registered Pharmacist Details

Name *	Qualification *	Other Qualification	Age *	Experience (In Years) *	Registration Number	Appointment Letter *	Joining Letter *	Educational Certificate *	Experience Certificate *	Registration Certificate *	Action
GRT	B. Pharm	Other Qualification	21	21	1	Yes No	Yes No	Yes No	Yes No	Yes No	Add Row

Identity Proof

Upload Identity Proof(PDF copy of Voter ID/PAN Card/Adhar Card/passport/Driving Licence) *

Choose File demo.pdf

Photo & Signature

(In case of partnership business you can upload a maximum of 4 signature and image.)

Owner Name * David Owner Name Owner Name Owner Name

User will upload the necessary documents

GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

192.168.9.24 STG

Welcome, Gourab

Home | Application | Payment | Change Password | Edit Profile | Callog | Feedback | Logout

Request.	Documents Upload	Attachments(in pdf)
1	Power of attorney(if any) in Non-judicial stamp paper as per proforma. Proforma	Choose File No file chosen
2	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy). *	Choose File No file chosen
3	Possession document of the premises . a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O. *	Choose File No file chosen
4	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
5	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.	Choose File No file chosen
6	Sketch map of proposed premises with location and surroundings (CAD Mode). *	Choose File No file chosen
7	Refrigerator related document of proposed premises. *	Choose File No file chosen
8	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3	Choose File No file chosen
9	Academic qualification testimonials of C.P.I(In case of whole sale).	Choose File No file chosen
10	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *	Choose File No file chosen
11	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable). *	Choose File No file chosen
12	Affidavit of Pharmacist/ CPI sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2	Choose File No file chosen
13	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
14	Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4	Choose File No file chosen

Submit

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

4 In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles. Choose File No file chosen
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7 Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3 Choose File No file chosen
8 Academic qualification testimonials of C.P.I(In case of whole sale). Choose File No file chosen
9 Pharmacist/ CPI record from, registration c Choose File No file chosen
10 Voter ID/ PAN Card/Aadhar Card/ Passport Choose File No file chosen
11 Affidavit of Pharmacist/ CPI sworn before fi Proforma1 , Proforma2 Choose File No file chosen

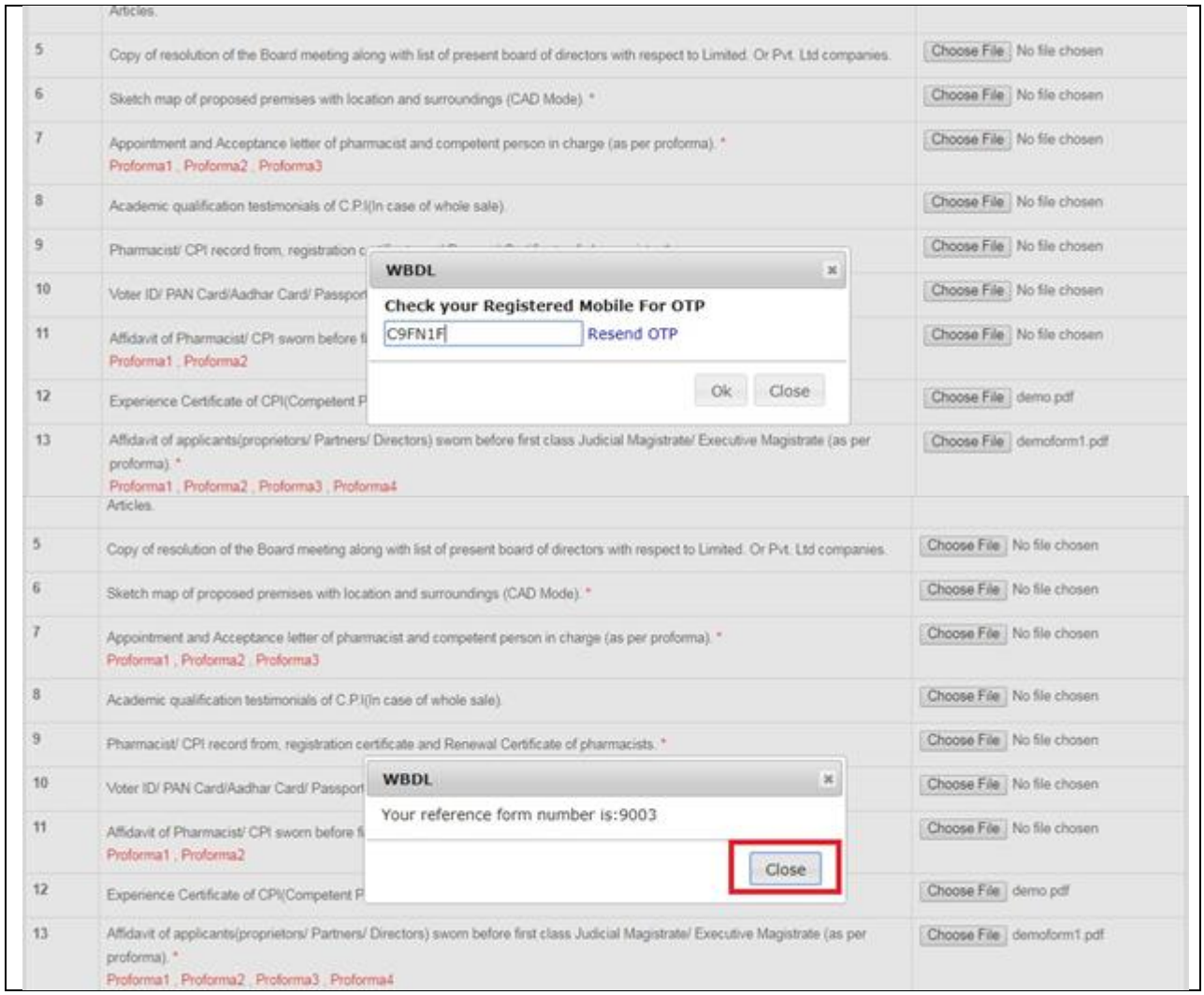
WBDL

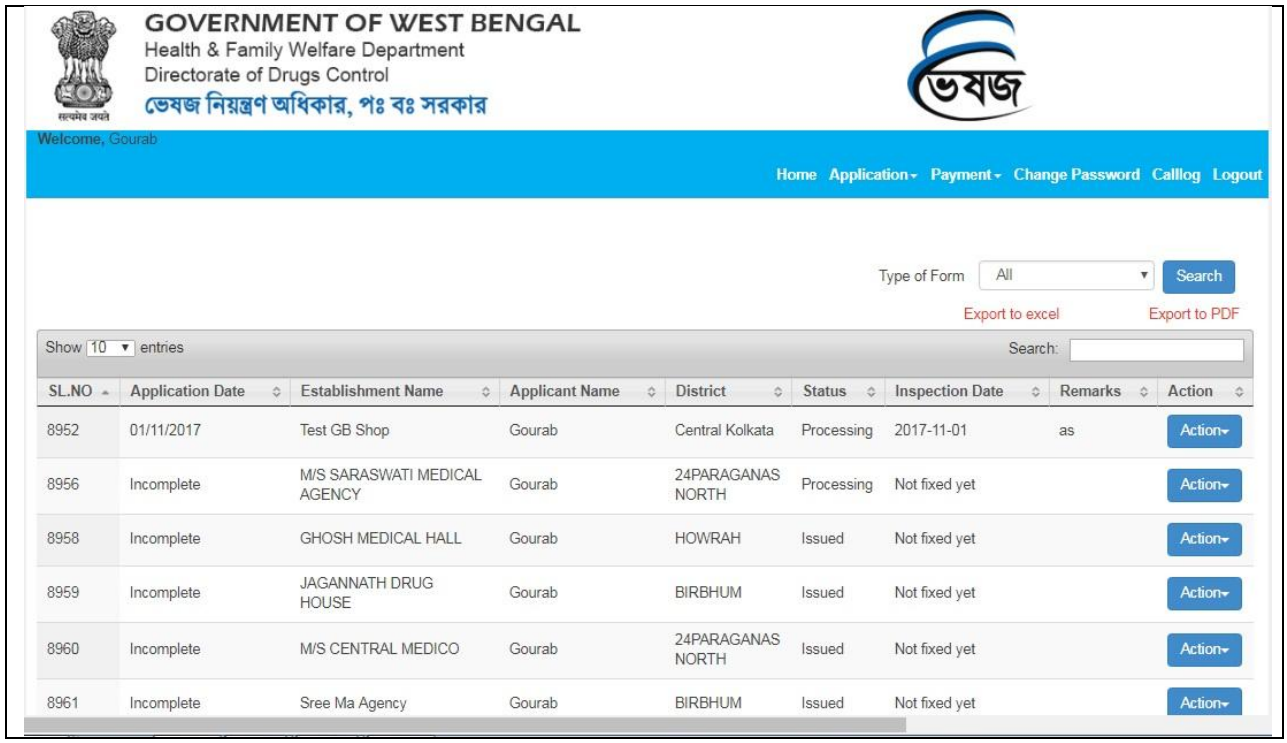
Check your Registered Mobile For OTP

Enter OTP | Resend OTP

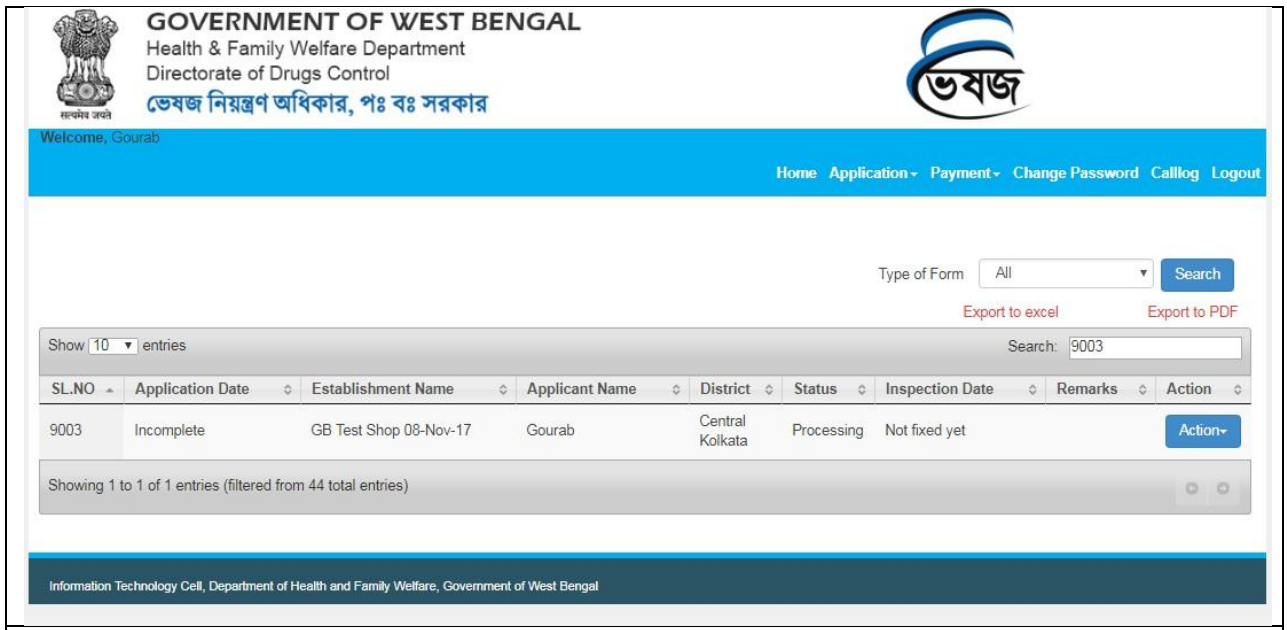
Ok | Close

12 Experience Certificate of CPI(Competent Person Incharge); as per rule. Choose File demo.pdf
13 Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4 Choose File demo.pdf


Articles.
5
Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.
Choose File No file chosen
6
Sketch map of proposed premises with location and surroundings (CAD Mode). *
Choose File No file chosen
7
Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). *
Proforma1 , Proforma2 , Proforma3
Choose File No file chosen
8
Academic qualification testimonials of C.P.I(In case of whole sale).
Choose File No file chosen
9
Choose File No file chosen
10
Choose File No file chosen
11
Choose File No file chosen
12
Choose File demo.pdf
13
Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). *
Proforma1 , Proforma2 , Proforma3 , Proforma4
Choose File demoform1.pdf
WBDL
Check your Registered Mobile For OTP
C9FN1F
Resend OTP
Ok
Close
Articles.
5
Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.
Choose File No file chosen
6
Sketch map of proposed premises with location and surroundings (CAD Mode). *
Choose File No file chosen
7
Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). *
Proforma1 , Proforma2 , Proforma3
Choose File No file chosen
8
Academic qualification testimonials of C.P.I(In case of whole sale).
Choose File No file chosen
9
Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *
Choose File No file chosen
10
Choose File No file chosen
11
Choose File No file chosen
12
Choose File demo.pdf
13
Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). *
Proforma1 , Proforma2 , Proforma3 , Proforma4
Choose File demoform1.pdf
WBDL
Your reference form number is:9003
Close

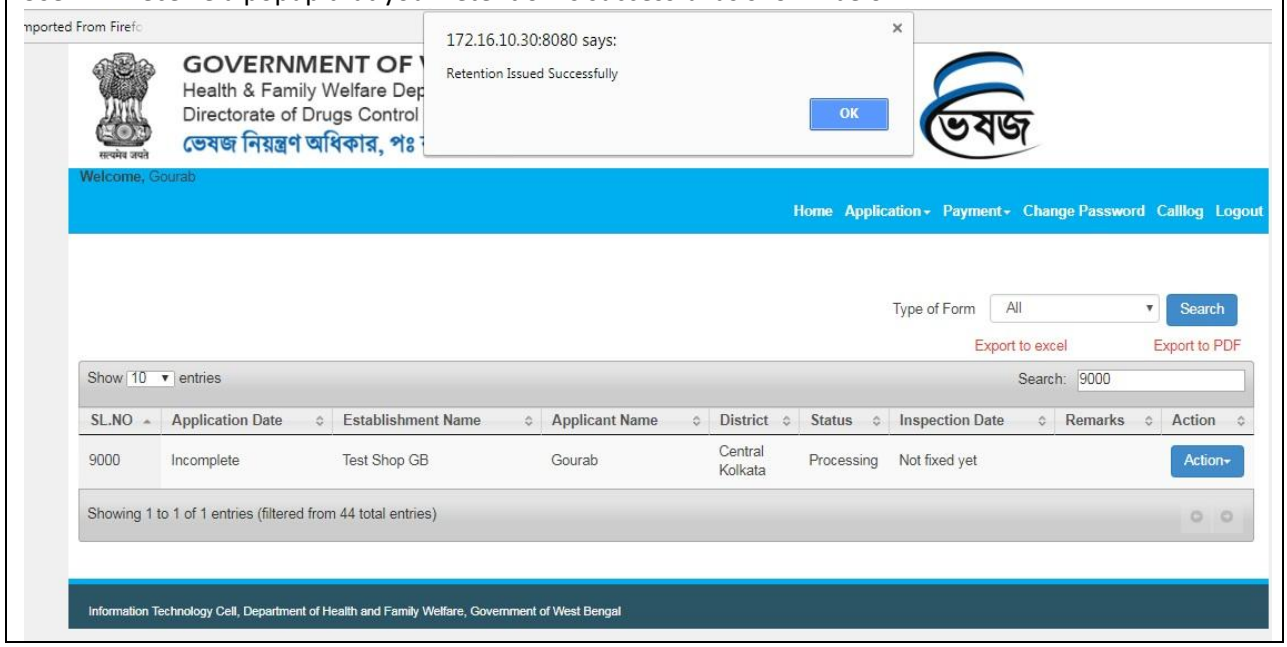


After uploading the document, User will get an OTP confirmation, which OTP will send to User's registered mobile number. After confirmation of OTP it will redirect to "view saved application" page. User will view the submitted application there or will search the application by form number as shown below.



User will click on "Action" button and will get 2 options "Excess Payment" & "Retention". If payment amount is perfectly done, user will click on "Retention" button. But if the payment Challan details mismatch retention of license will be restricted. Restriction details are mentioned in other section below

User will receive a popup that your retention is successful as shown below.



User will also receive a SMS to their registered mobile phone which is as follows:

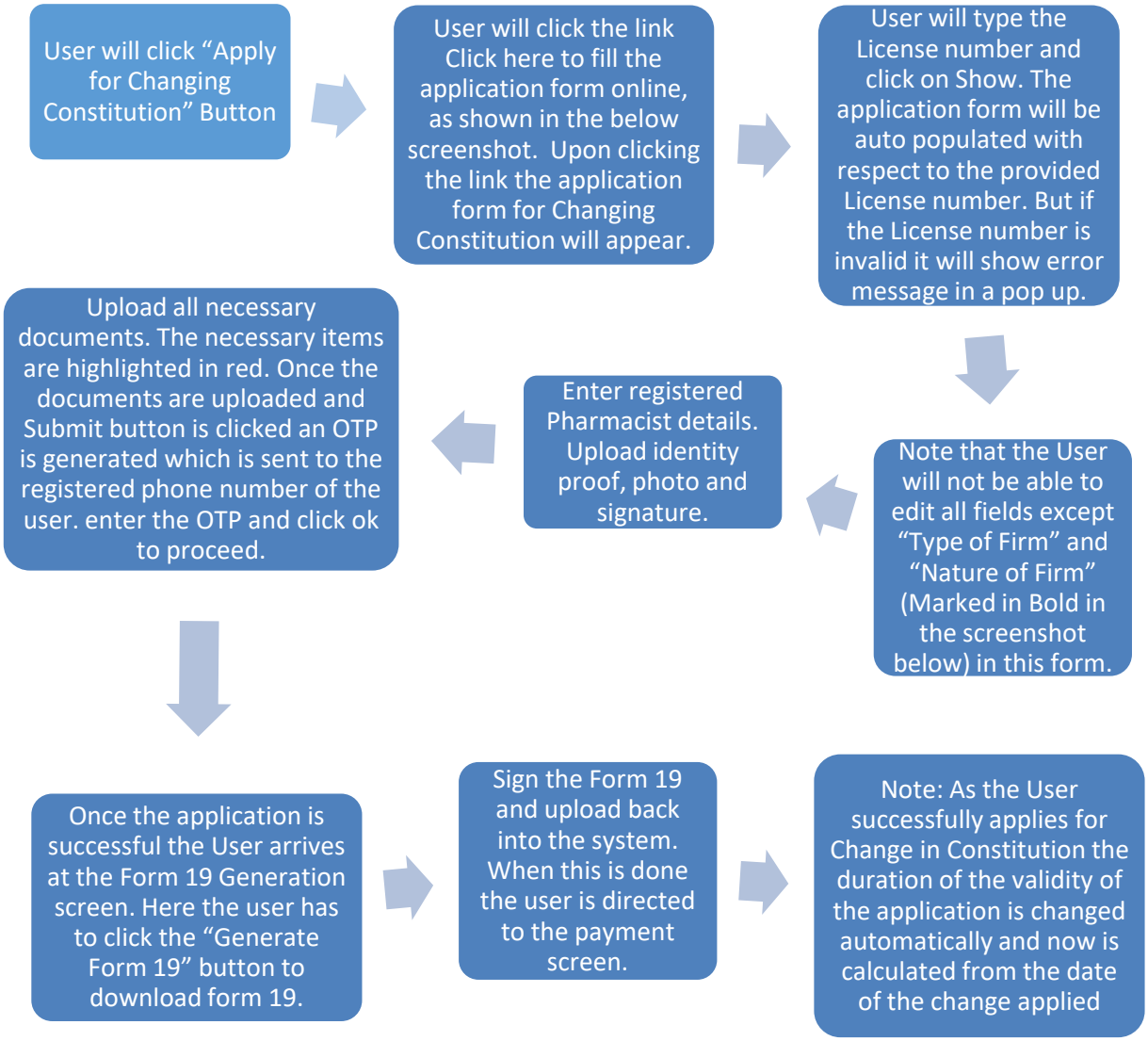
"**Your Retention has been issued**"

12 Apply for changing Constitution

For applying Change in Constitution User can change and maintain the following

- Name of firm
- Nature of firm
- Area of firm
- Height of firm
- Is it for an application due to change in constitution of a Licensed Firm? If so, please note the date of such change and manner. (Change date, manner)
- Image signature upload staff record entry and document upload.

12.1 Process Flow



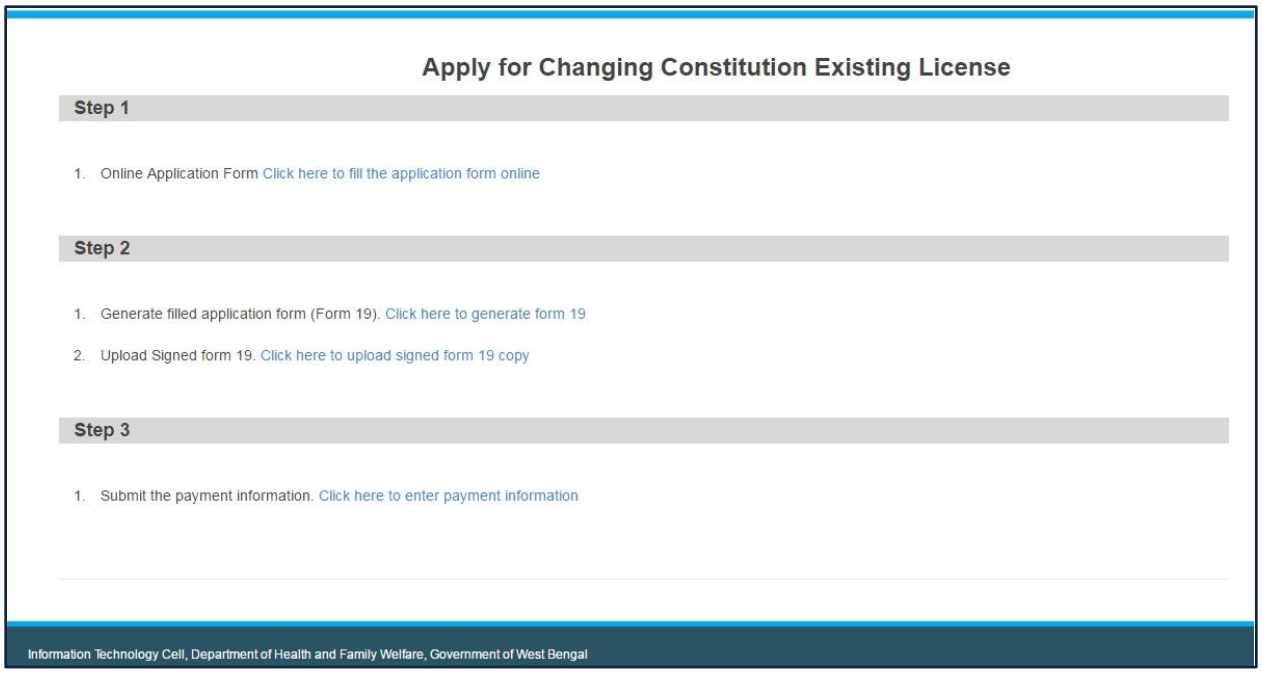
12.1.1 Detailed Steps

- User will click “Apply for Changing Constitution” Button
- User will click the link Click here to fill the application form online, as shown in the below screenshot. Upon clicking the link the application form for Changing Constitution will appear.
- User will type the License number and click on Show. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up.
- Note that the User will not be able to edit all fields except “Type of Firm” and “Nature of Firm” (Marked in Bold in the screenshot below) in this form.
- Enter registered Pharmacist details. Upload identity proof, photo and signature.
- Upload all necessary documents. The necessary items are highlighted in red. Once the documents are uploaded and Submit button is clicked an OTP is generated which is sent to the registered phone number of the user. enter the OTP and click ok to proceed.
- Once the application is successful the User arrives at the Form 19 Generation screen. Here the user has to click the “Generate Form 19” button to download form 19.
- Sign the Form 19 and upload back into the system. When this is done the user is directed to the payment screen.
- Note: As the User successfully applies for Change in Constitution the duration of the validity of the application is changed automatically and now is calculated from the date of the change applied

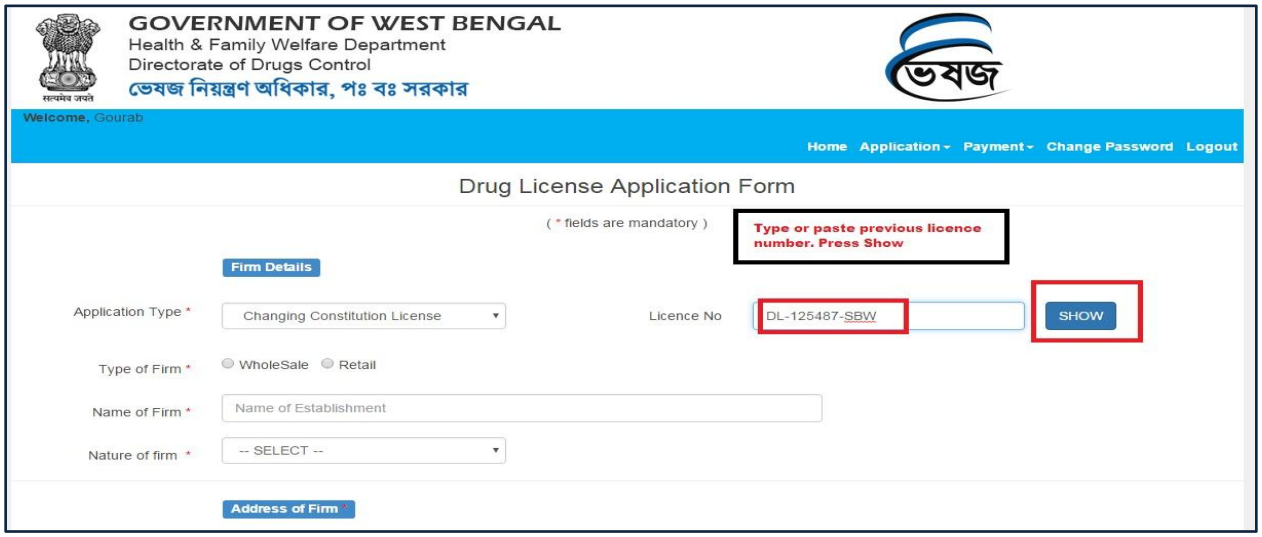
12.1.2 Screenshot View

Step 1: User will click “Apply for Changing Constitution” Button

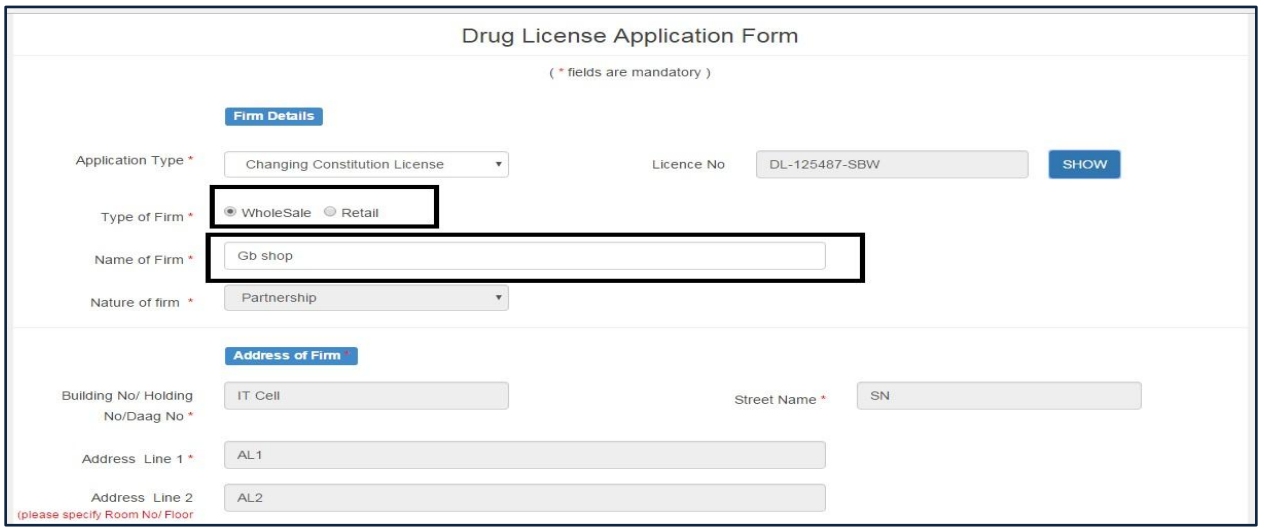
Step 2: User will click the link Click here to fill the application form online, as shown in the below screenshot. Upon clicking the link the application form for Changing Constitution will appear.



Step 3: User will type the License number and click on Show. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up.



Step 4: Note that the User will not be able to edit all fields except “Type of Firm” and “Nature of Firm” (Marked in Bold in the screenshot below) in this form.



No if availble)

District * Central Kolkata

Post Office For Kolkata Kolkata GPO

Police Station PS

City/Village * Kol

Pin Code * 700001

Local Authority * KMA

Contact Details of establishment

Email ID * banerjee.gourab08@gmail.com

Landline 03324471437
(ex:033-xxxx-xxxx)

Mobile * 9874481064
(Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted: Qualification of the person responsible for operation if granted

Modification of Credentials* Not Applicable

Registered Pharmacist Details

Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joining Le
Swapan	B. Pharm	Computer	21	1	ASD1245	Yes / No	Yes / No

Identity Proof

Upload Identity Proof(PDF copy of Voter ID/PAN Card/Adhar Card/passport/Driving Licence) *

Choose File demo.pdf

Photo & Signature

(In case of partnership business you can upload a maximum of 4 signature and image.)

Service Details

Categories of drugs to be sold * Both

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises Yes No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory: Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory

Actual floor space area* (Min 108 sq.ft) 123 sqft.

Height from floor to ceiling 12 ft.

Trade Licence Applied for Licence Available

NEXT

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * sws

2. Nature of Ceiling * RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Owned by Applicant

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * Yes No

7. a) Date 2017-05-23

7. b) Manner of Change

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 12

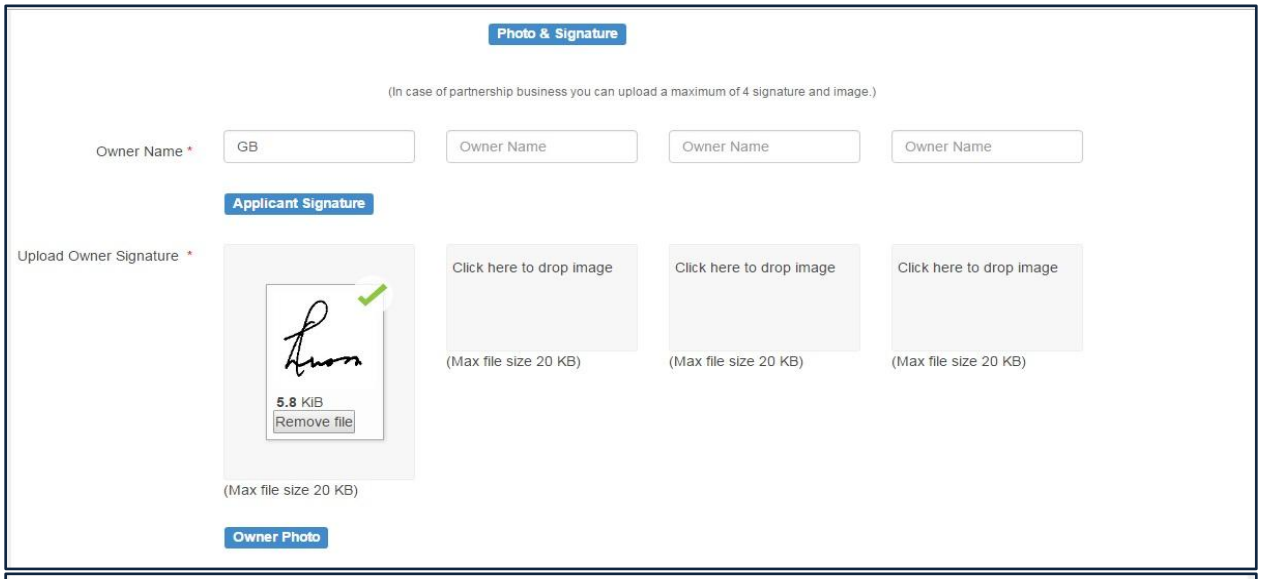
11. Weekly Closing Day Monday

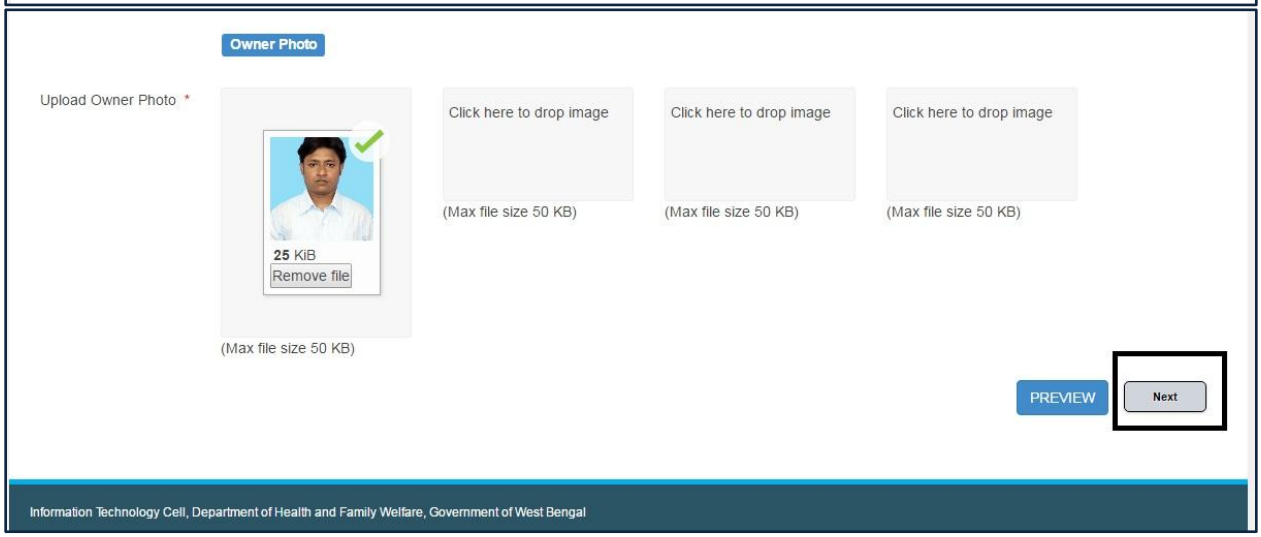
(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

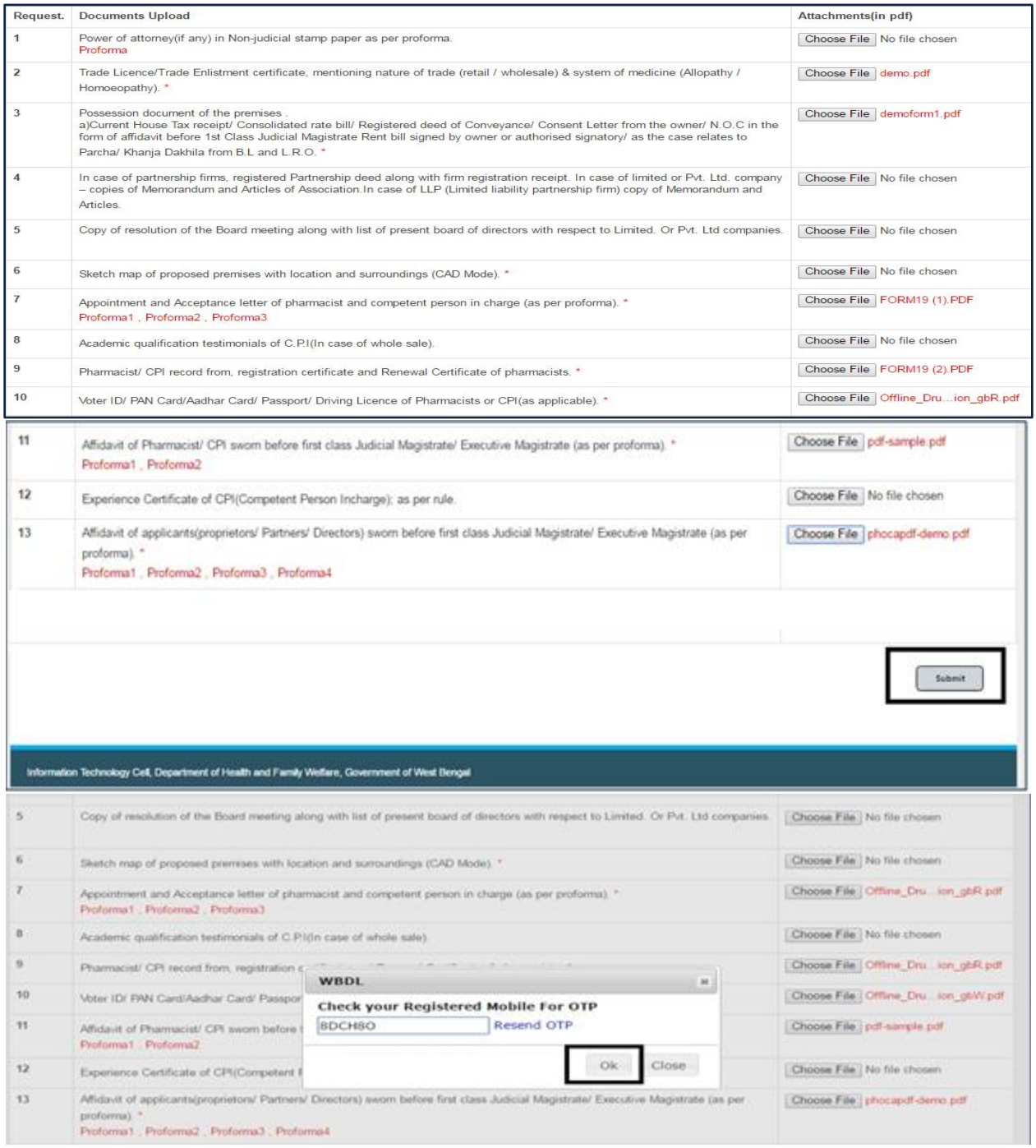
PREV PREVIEW NEXT

Step 5: Enter registered Pharmacist details. Upload identity proof, photo and signature.





Step 6: Upload all necessary documents. The necessary items are highlighted in red. Once the documents are uploaded and Submit button is clicked an OTP is generated which is sent to the registered phone number of the user. enter the OTP and click ok to proceed.



Request.	Documents Upload	Attachments(in pdf)
1	Power of attorney(if any) in Non-judicial stamp paper as per proforma. Proforma	Choose File No file chosen
2	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy). *	Choose File demo.pdf
3	Possession document of the premises . a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O. *	Choose File demoform1.pdf
4	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
5	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.	Choose File No file chosen
6	Sketch map of proposed premises with location and surroundings (CAD Mode). *	Choose File No file chosen
7	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3	Choose File FORM19 (1).PDF
8	Academic qualification testimonials of C.P.I(In case of whole sale).	Choose File No file chosen
9	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *	Choose File FORM19 (2).PDF
10	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable). *	Choose File Offline_Dru...ion_gbR.pdf
11	Affidavit of Pharmacist/ CPI sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2	Choose File pdf-sample.pdf
12	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
13	Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4	Choose File phocapdf-demo.pdf

Submit

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

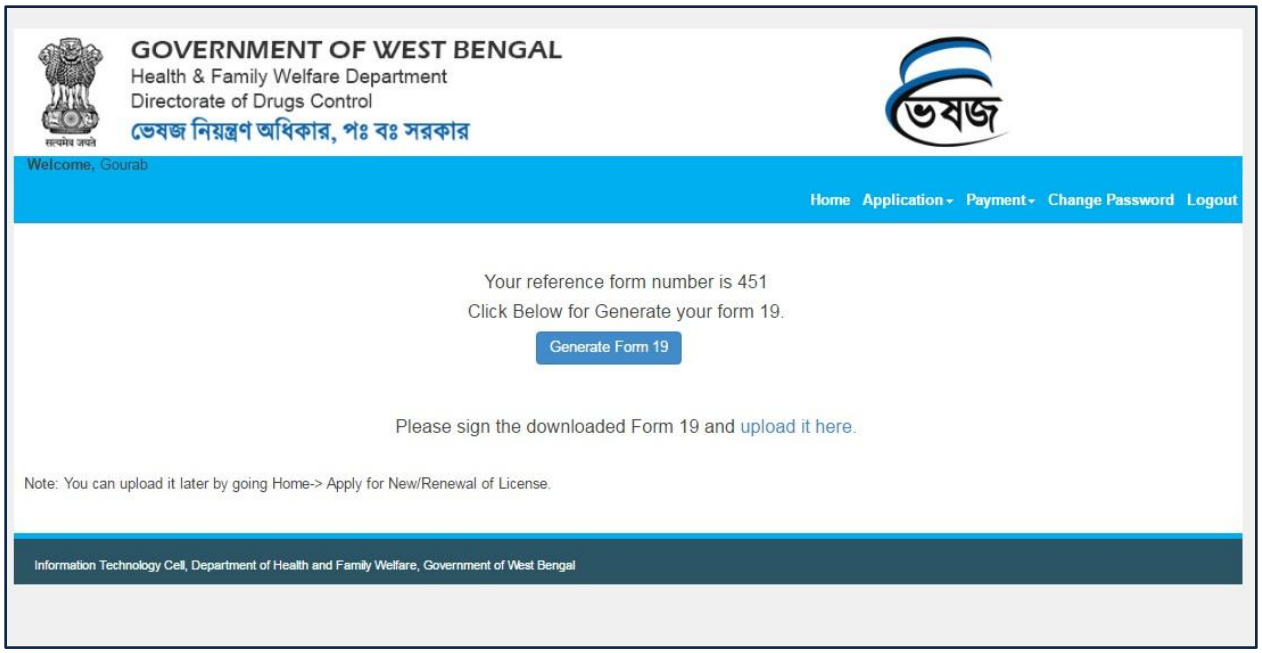
WBDL

Check your Registered Mobile For OTP

8DCH8O Resend OTP

Ok Close

Step 7: Once the application is successful the User arrives at the Form 19 Generation screen. Here the user has to click the “Generate Form 19” button to download form 19.



Step 8: Sign the Form 19 and upload back into the system. When this is done the user is directed to the payment screen.

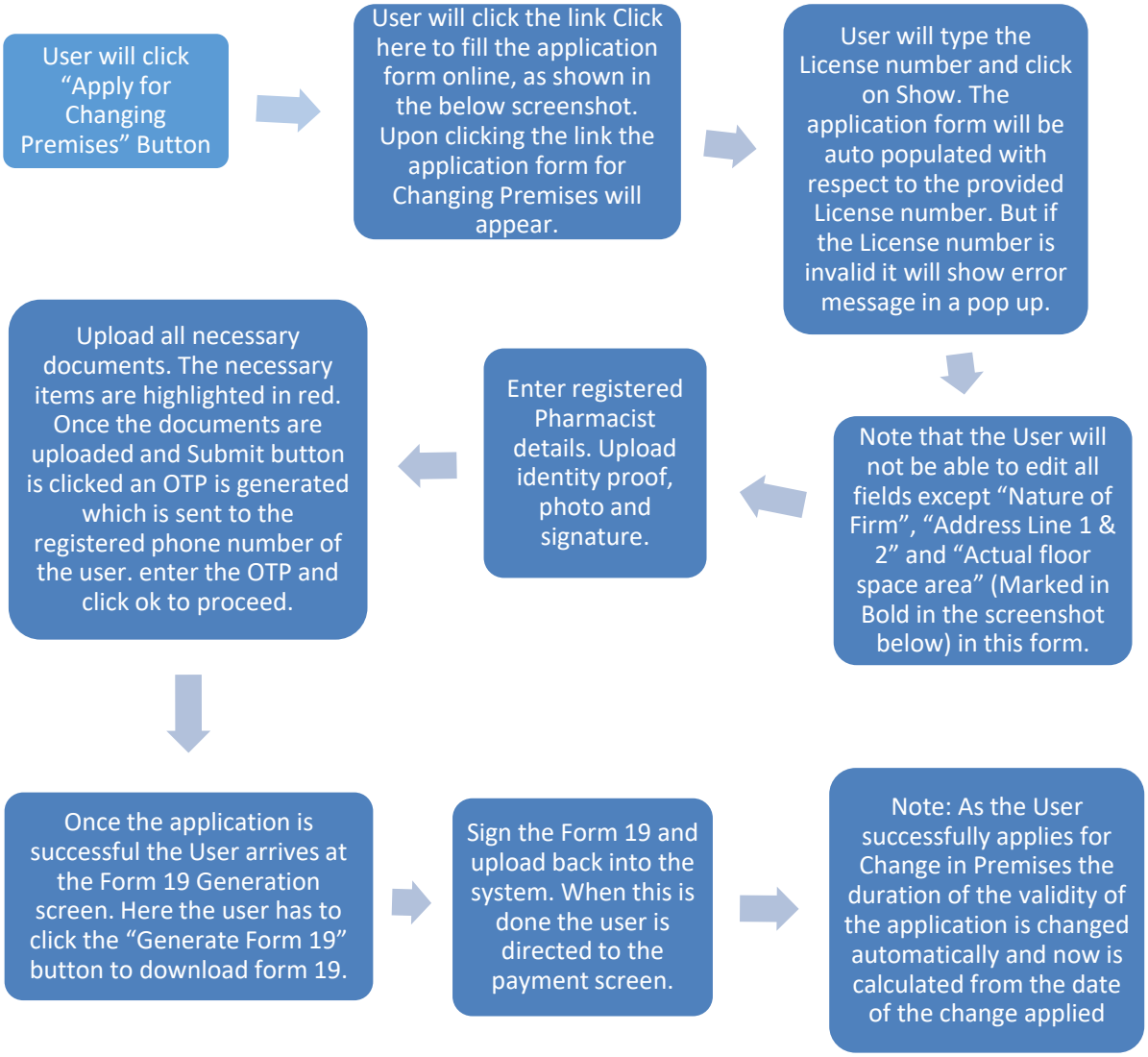
Note: As the User successfully applies for Change in Constitution the duration of the validity of the application is changed automatically and now is calculated from the date of the change applied.

13 Apply for changing Premises

For applying Change in Premises User can change and maintain the following

- Address related all fields
- Premises Type
- Area of firm
- Height of firm
- Staff record entry and document upload.

13.1 Process Flow



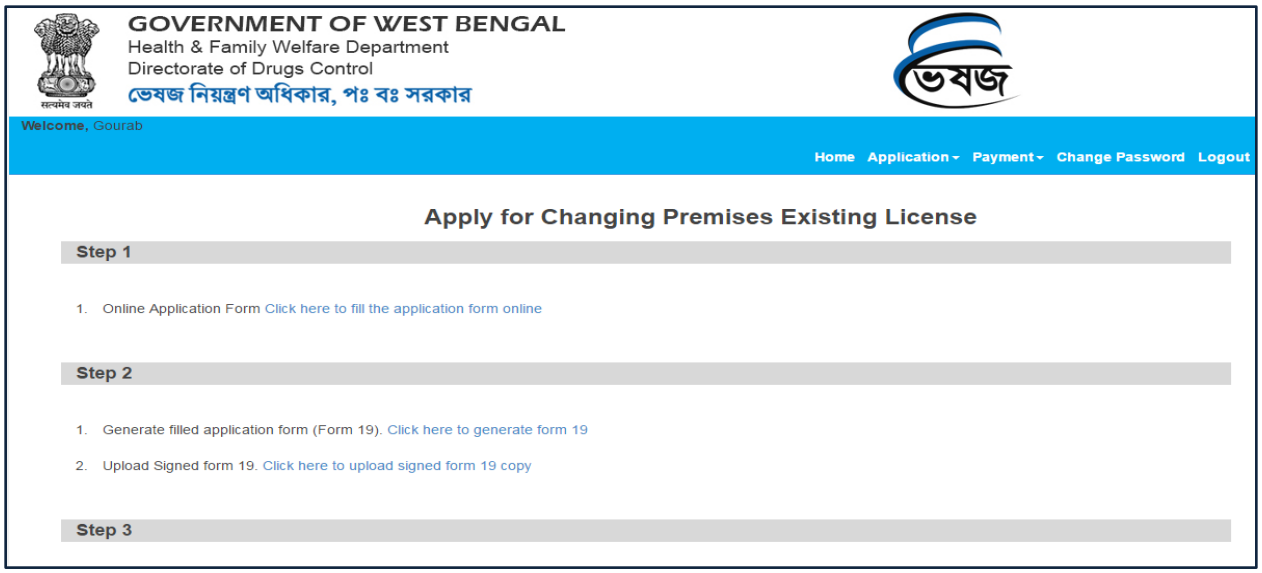
13.2 Detailed Steps

- User will click “Apply for Changing Premises” Button
- User will click the link Click here to fill the application form online, as shown in the below screenshot. Upon clicking the link the application form for Changing Premises will appear.
- User will type the License number and click on Show. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up.
- Note that the User will not be able to edit all fields except “Nature of Firm”, “Address Line 1 & 2” and “Actual floor space area” (Marked in Bold in the screenshot below) in this form.
- Enter registered Pharmacist details. Upload identity proof, photo and signature.
- Upload all necessary documents. The necessary items are highlighted in red. Once the documents are uploaded and Submit button is clicked an OTP is generated which is sent to the registered phone number of the user. enter the OTP and click ok to proceed.
- Once the application is successful the User arrives at the Form 19 Generation screen. Here the user has to click the “Generate Form 19” button to download form 19.
- Sign the Form 19 and upload back into the system. When this is done the user is directed to the payment screen.
- Note: As the User successfully applies for Change in Premises the duration of the validity of the application is changed automatically and now is calculated from the date of the change applied

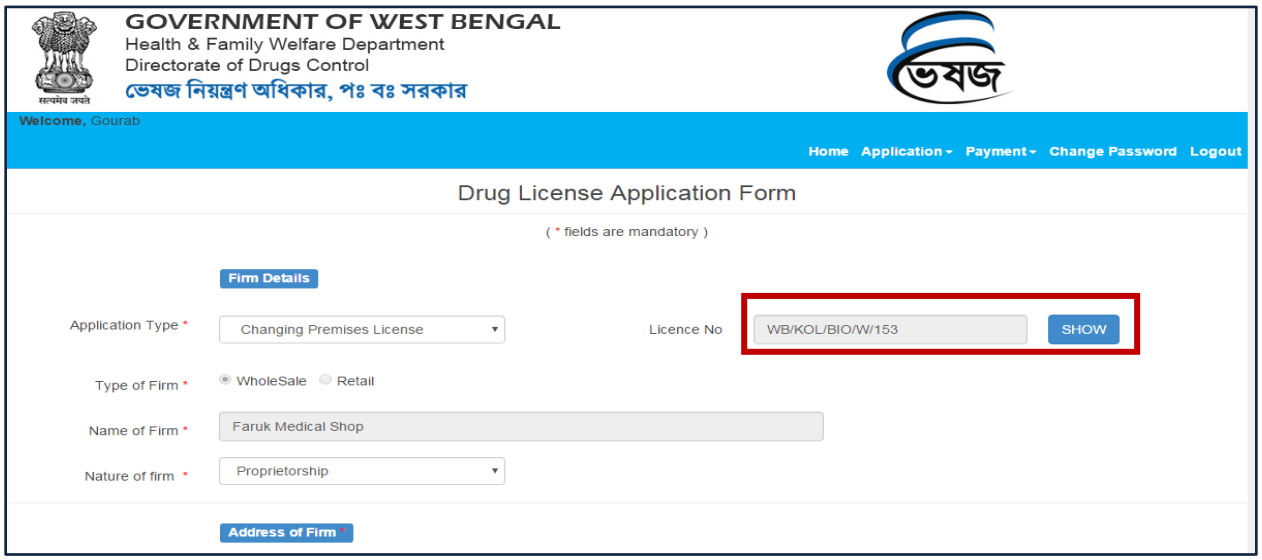
13.3 Screenshot View

Step 1: User will click “Apply for Changing Premises” Button

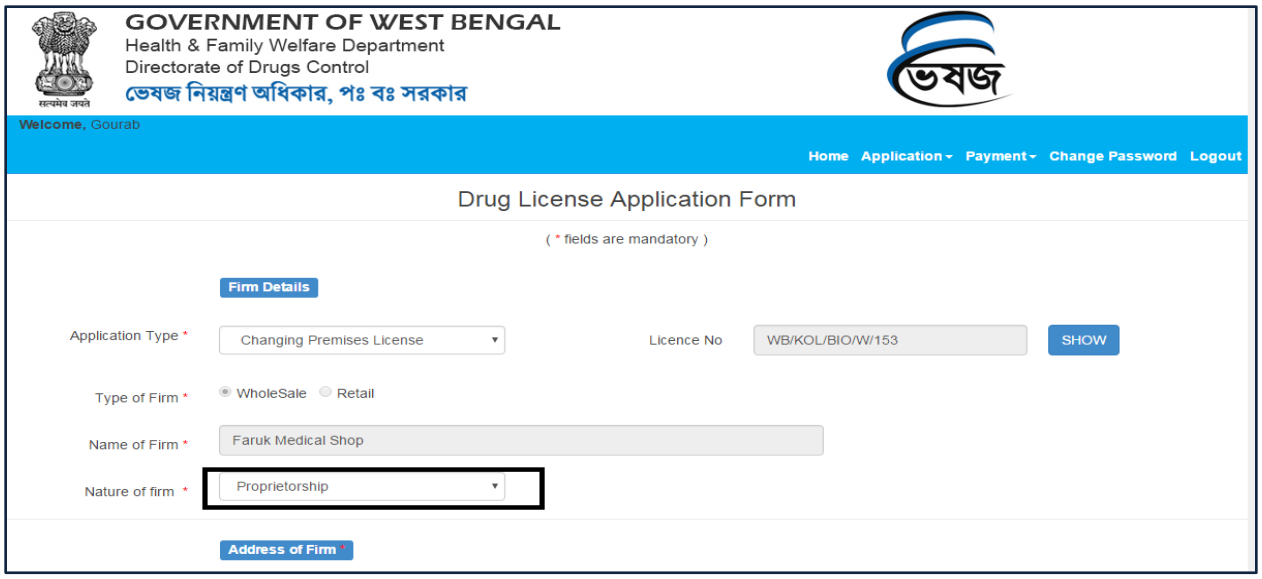
Step 2: User will click the link Click here to fill the application form online, as shown in the below screenshot. Upon clicking the link the application form for Changing Premises will appear.



Step 3: User will type the License number and click on Show. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up.



Step 4: Note that the User will not be able to edit all fields except “Nature of Firm”, “Address Line 1 & 2” and “Actual floor space area” (Marked in Bold in the screenshot below) in this form.



Address of Firm

Building No/ Holding No/Daag No * : BN

Street Name * : Sn

Address Line 1 * : Ad1

Address Line 2 (please specify Room No/ Floor No if available) : Ad2

District * : Central Kolkata

Post Office For Kolkata : Kolkata GPO

Police Station : PS

City/Village * : Kolkata

Pin Code * : 700001

Local Authority * : KMA

Contact Details of establishment

Email ID * : banerjee.gourab08@gmail.com

Landline : 03324454545 (ex:033-xxxx-xxxx)

Mobile * : 9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted : Qualification of the person responsible for operation if granted

Modification of Credentials* : Not Applicable

Service Details

Categories of drugs to be sold * : Both

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises : Yes No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory : Qualification of the person responsible for operation if granted

Actual floor space area* (Min 108 sq.ft) : 108 sqft.

Height from floor to ceiling : 9'2" ft.

Trade Licence : Applied for Licence Available

NEXT

GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

Welcome, Gourab

Home Application Payment Change Password Logout

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * : Qualification of the person responsible for operation if granted

2. Nature of Ceiling * : RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * : Yes No

4. Do you have any other Drug Licence? * : Yes No

5. Whether any other application has been rejected or convicted under D & A Act? : Yes No

6. Premises Type * : Owned by Applicant

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * : Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * : Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requiring Cold storage. If so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * : Yes No

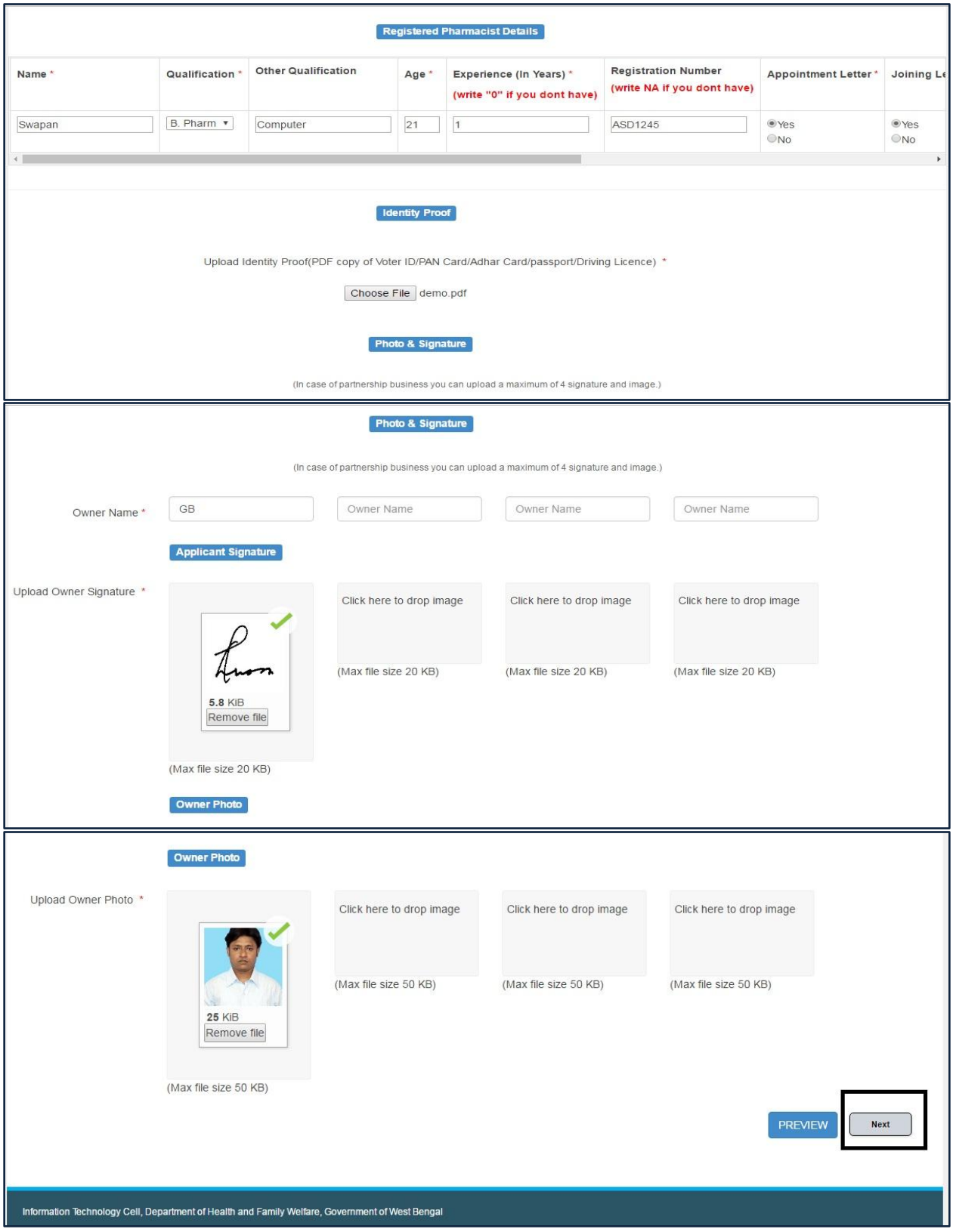
10. Working Hour : 12

11. Weekly Closing Day : Monday (Please provide any day of the week. like Sunday,Monday.....)

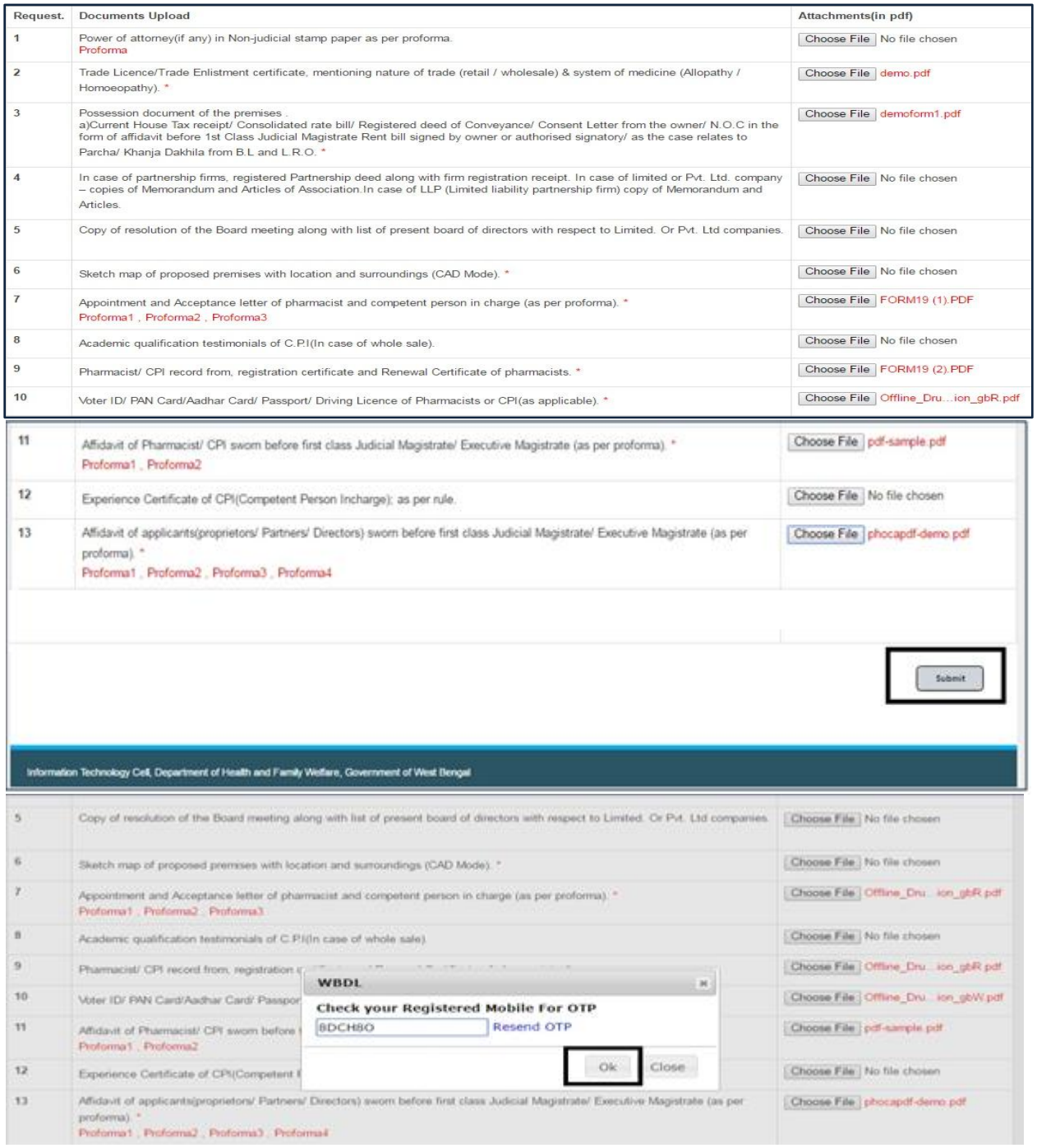
12. Total Working days (in a week) : 6

PREV PREVIEW NEXT

Step 5: Enter registered Pharmacist details. Upload identity proof, photo and signature.



Step 6: Upload all necessary documents. The necessary items are highlighted in red. Once the documents are uploaded and Submit button is clicked an OTP is generated which is sent to the registered phone number of the user. enter the OTP and click ok to proceed.



Request.	Documents Upload	Attachments(in pdf)
1	Power of attorney(if any) in Non-judicial stamp paper as per proforma. Proforma	Choose File No file chosen
2	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy). *	Choose File demo.pdf
3	Possession document of the premises . a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O. *	Choose File demoform1.pdf
4	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
5	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.	Choose File No file chosen
6	Sketch map of proposed premises with location and surroundings (CAD Mode). *	Choose File No file chosen
7	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3	Choose File FORM19 (1).PDF
8	Academic qualification testimonials of C.P.I(In case of whole sale).	Choose File No file chosen
9	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *	Choose File FORM19 (2).PDF
10	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable). *	Choose File Offline_Dru...ion_gbR.pdf
11	Affidavit of Pharmacist/ CPI sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2	Choose File pdf-sample.pdf
12	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
13	Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4	Choose File phocapdf-demo.pdf

Submit

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

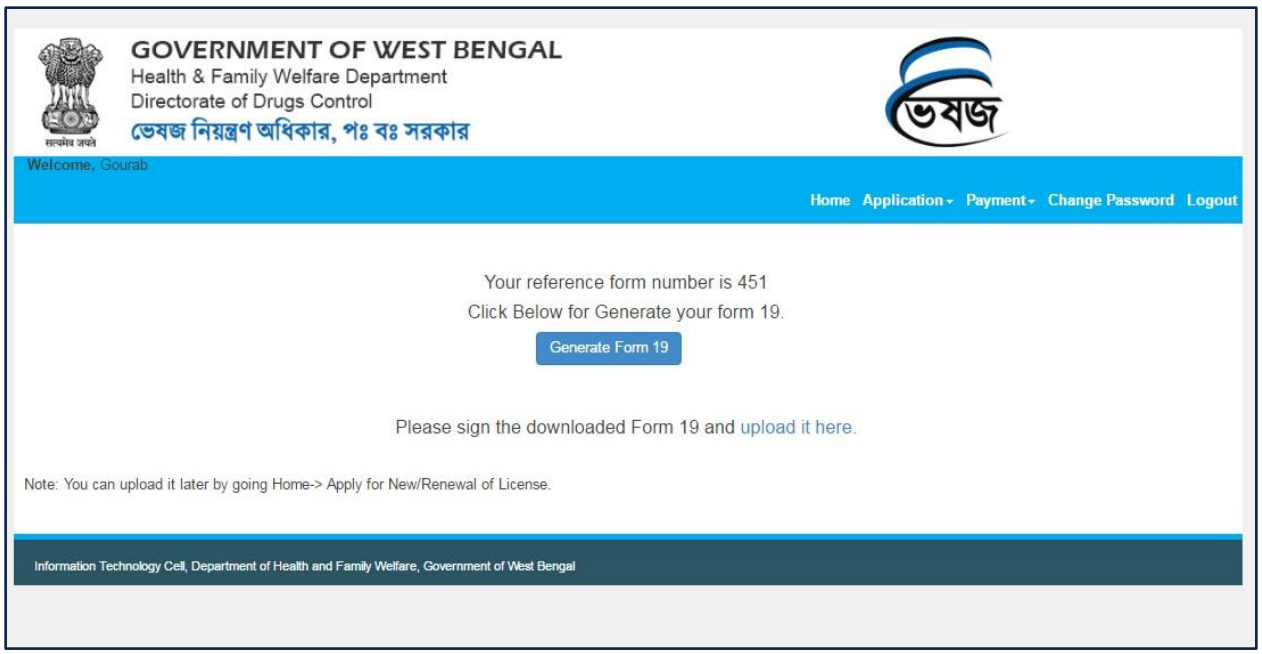
WBDL

Check your Registered Mobile For OTP

8DCH8O Resend OTP

Ok Close

Step 7: Once the application is successful the User arrives at the Form 19 Generation screen. Here the user has to click the “Generate Form 19” button to download form 19.



Step 8: Sign the Form 19 and upload back into the system. When this is done the user is directed to the payment screen.

Note: As the User successfully applies for Change in Premises the duration of the validity of the application is changed automatically and now is calculated from the date of the change applied.

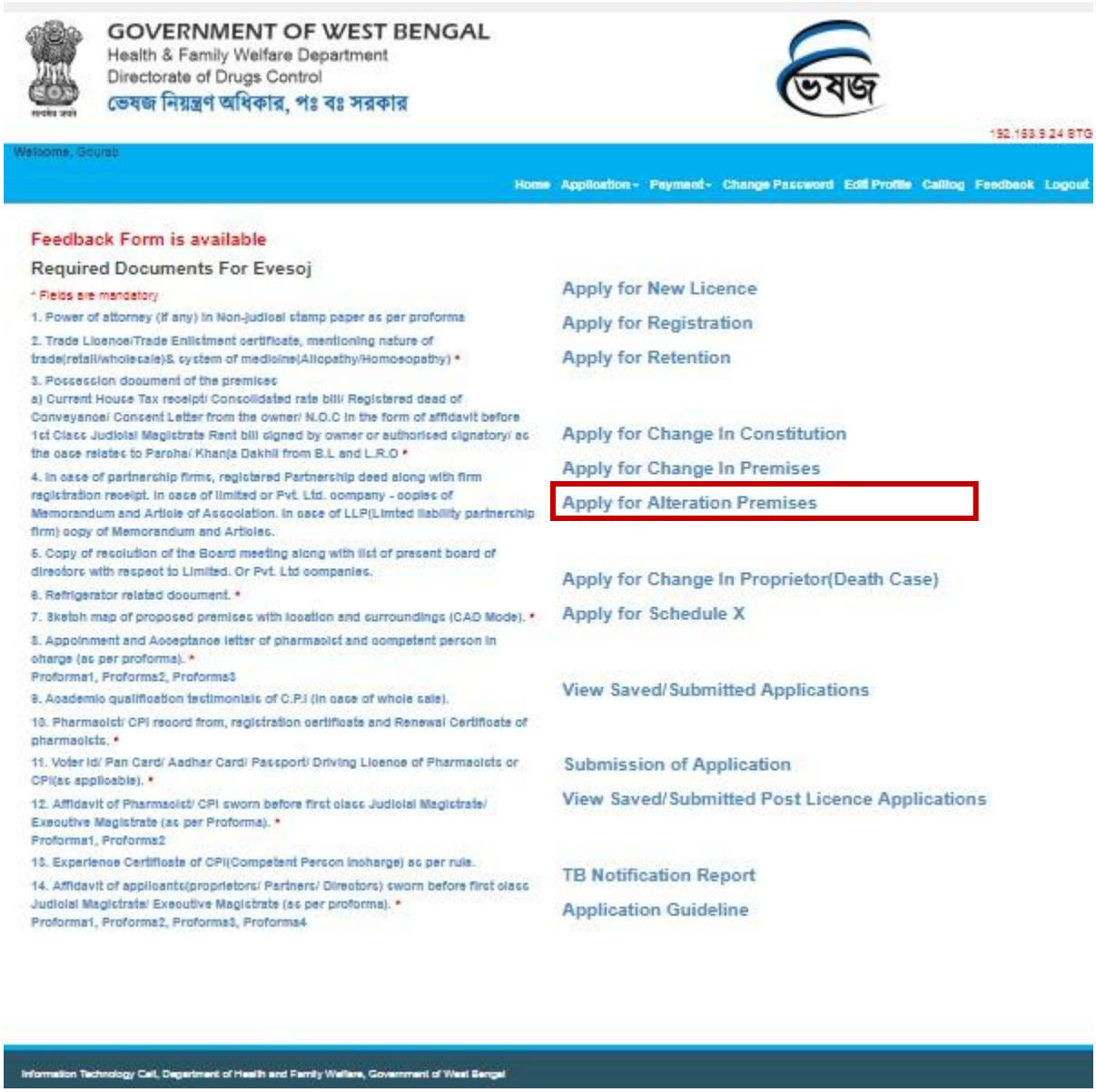
14 Apply for Alteration of Premices

For applying Alteration of Premises, User can change and maintain the following

- Premises Type
- Area of firm
- Height of firm
- Staff record entry and document upload.

14.1 Screenshot View

Step 1: User will click “Apply for Changing Proprietor” Button

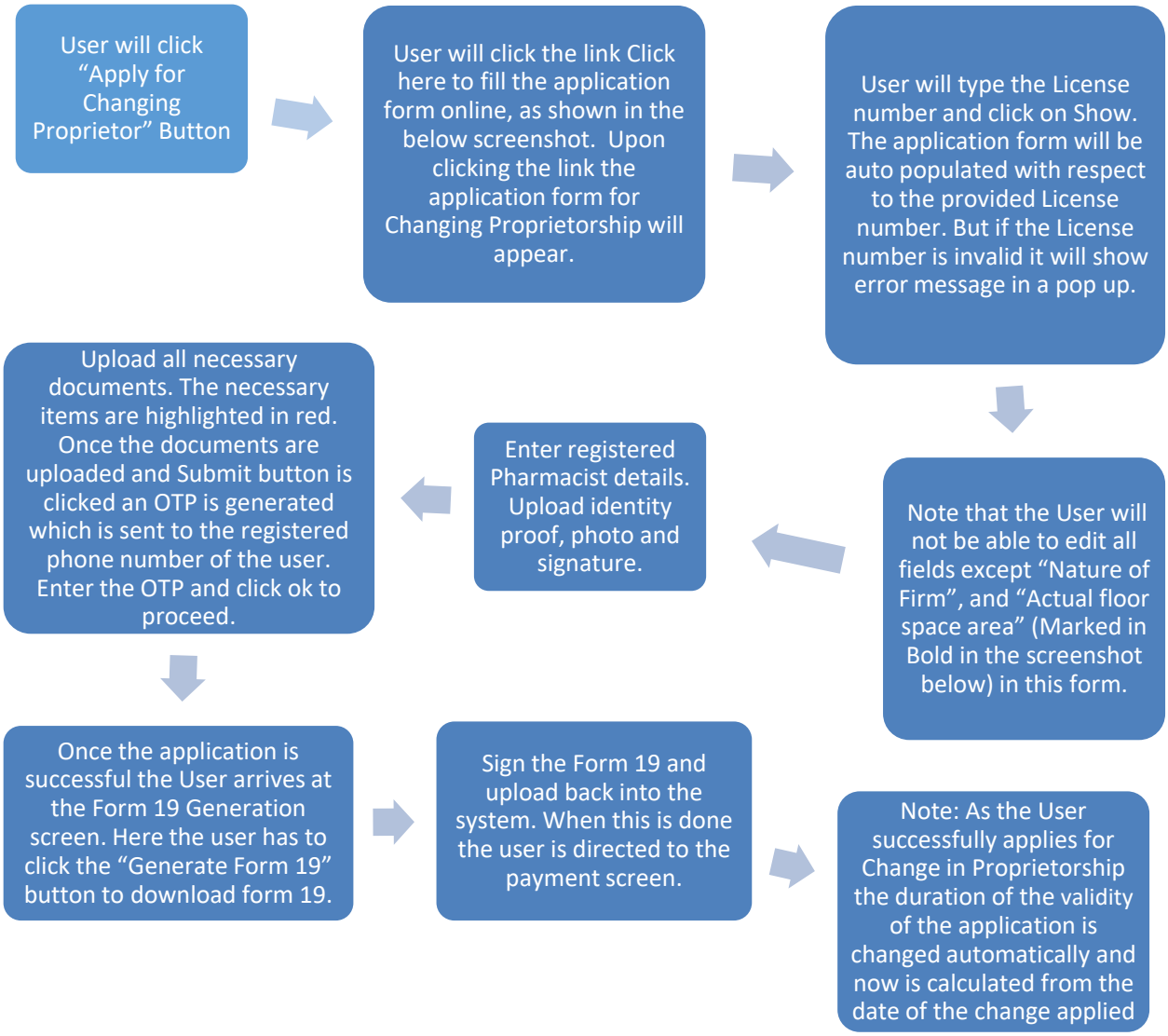


15 Apply for changing Proprietorship

For applying Change in Proprietorship User can change and maintain the following

- Nature of firm
- Premises Type
- Image signature upload staff record entry and document upload.

15.1 Process Flow

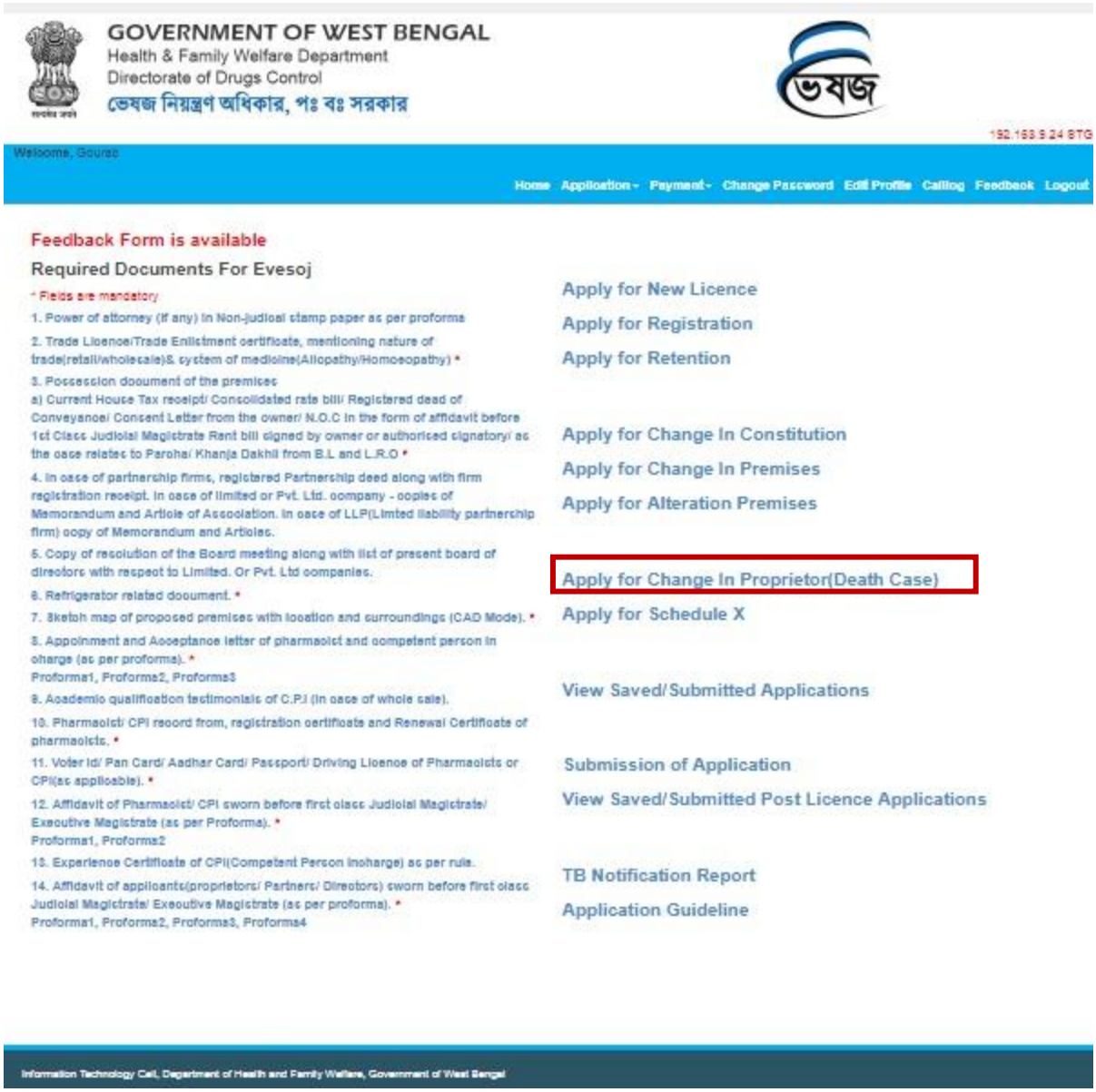


15.2 Detailed Steps

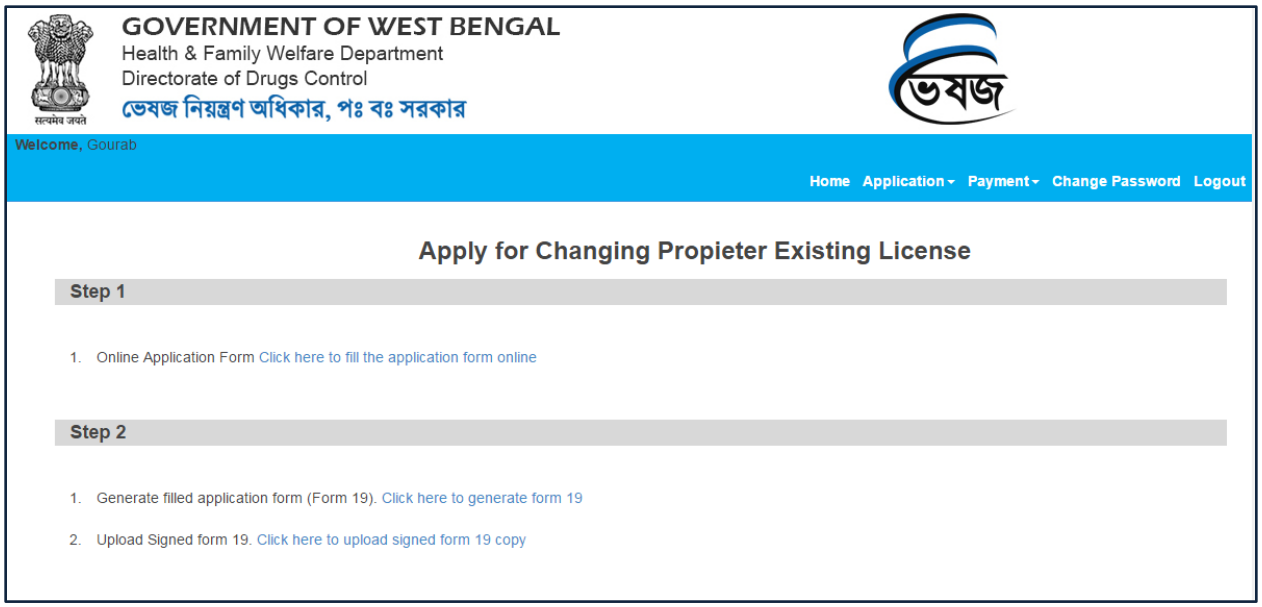
- User will click “Apply for Changing Proprietor” Button
- User will click the link Click here to fill the application form online, as shown in the below screenshot. Upon clicking the link the application form for Changing Proprietorship will appear.
- User will type the License number and click on Show. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up.
- Note that the User will not be able to edit all fields except “Nature of Firm”, and “Actual floor space area” (Marked in Bold in the screenshot below) in this form.
- Enter registered Pharmacist details. Upload identity proof, photo and signature.
- Upload all necessary documents. The necessary items are highlighted in red. Once the documents are uploaded and Submit button is clicked an OTP is generated which is sent to the registered phone number of the user. Enter the OTP and click ok to proceed.
- Once the application is successful the User arrives at the Form 19 Generation screen. Here the user has to click the “Generate Form 19” button to download form 19.
- Sign the Form 19 and upload back into the system. When this is done the user is directed to the payment screen.
- Note: As the User successfully applies for Change in Proprietorship the duration of the validity of the application is changed automatically and now is calculated from the date of the change applied

15.3 Screenshot View

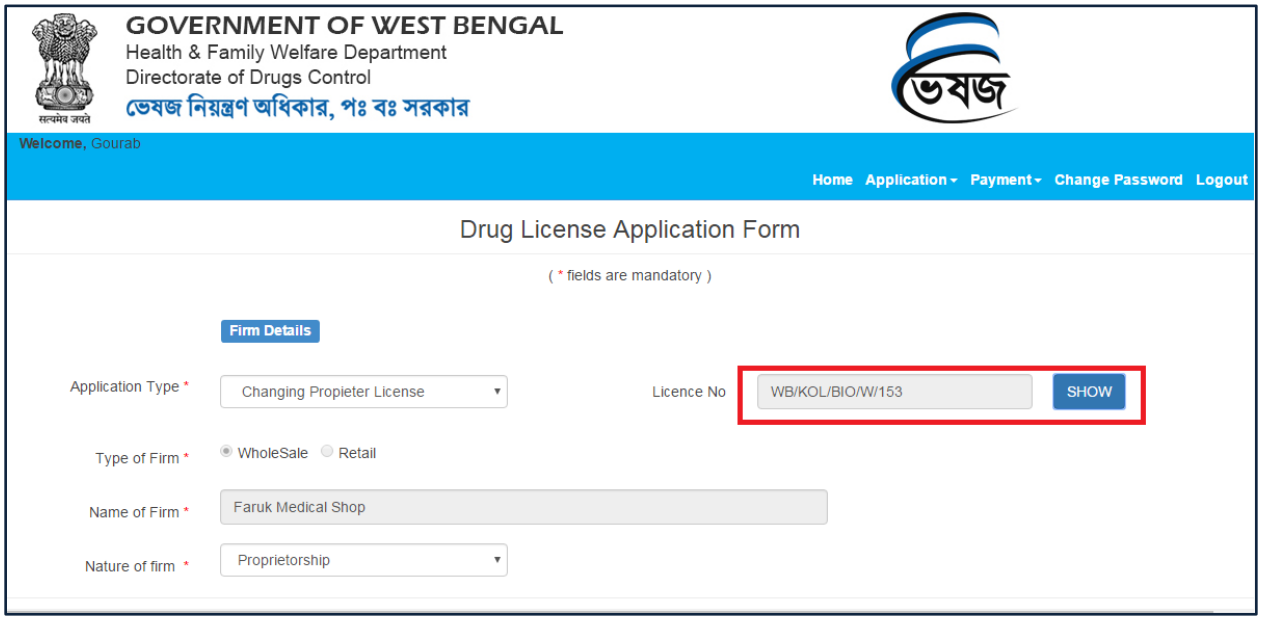
Step 1: User will click “Apply for Changing Proprietor” Button



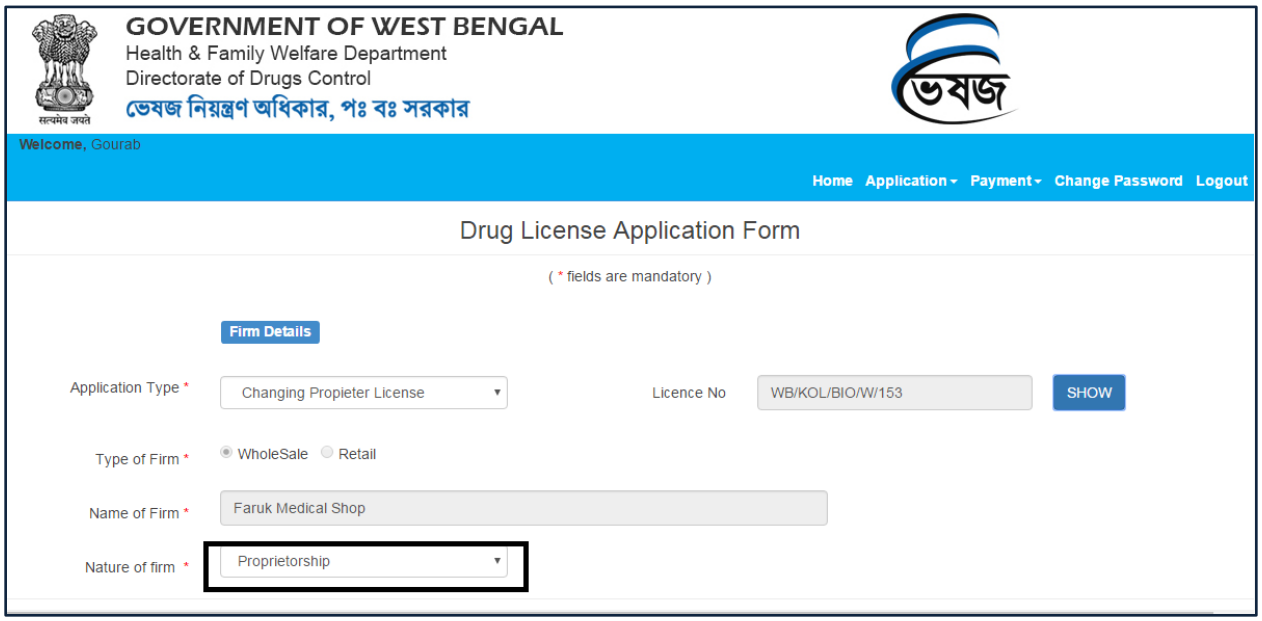
Step 2: User will click the link Click here to fill the application form online, as shown in the below screenshot. Upon clicking the link the application form for Changing Proprietorship will appear.



Step 3: User will type the License number and click on Show. The application form will be auto populated with respect to the provided License number. But if the License number is invalid it will show error message in a pop up.



Step 4: Note that the User will not be able to edit all fields except “Nature of Firm”, and “Actual floor space area” (Marked in Bold in the screenshot below) in this form.



Address of Firm

Building No/ Holding No/Daag No *	BN	Street Name *	Sn
Address Line 1 *	Ad1		
Address Line 2 please specify Room No/ Floor No if availble)	Ad2		
District *	Central Kolkata		
Post Office For Kolkata	Kolkata GPO	Police Station	PS
City/Village *	Kolkata	Pin Code *	700001
Local Authority *	KMA		

Contact Details of establishment

Email ID *	banerjee.gourab08@gmail.com		
Landline	03324454545 (ex:033-xxxx-xxxx)	Mobile *	9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted	Qualification of the person responsible for operation if granted
Modification of Credentials*	Not Applicable

Service Details

Categories of drugs to be sold *	Both

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises — Yes / No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory	Qualification of the person responsible for operation if granted		
Actual floor space area* (Min 108 sq.ft)	108 sqft.	Height from floor to ceiling	9'2" ft.

Trade Licence — Applied for Licence / Available

NEXT

GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

Welcome, Gourab

Home Application Payment Change Password Logout

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). *	Qualification of the person responsible for operation if granted
2. Nature of Ceiling *	RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * — Yes / No

4. Do you have any other Drug Licence? * — Yes / No

5. Whether any other application has been rejected or convicted under D & A Act? — Yes / No

6. Premises Type * — Owned by Applicant

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * — Yes / No

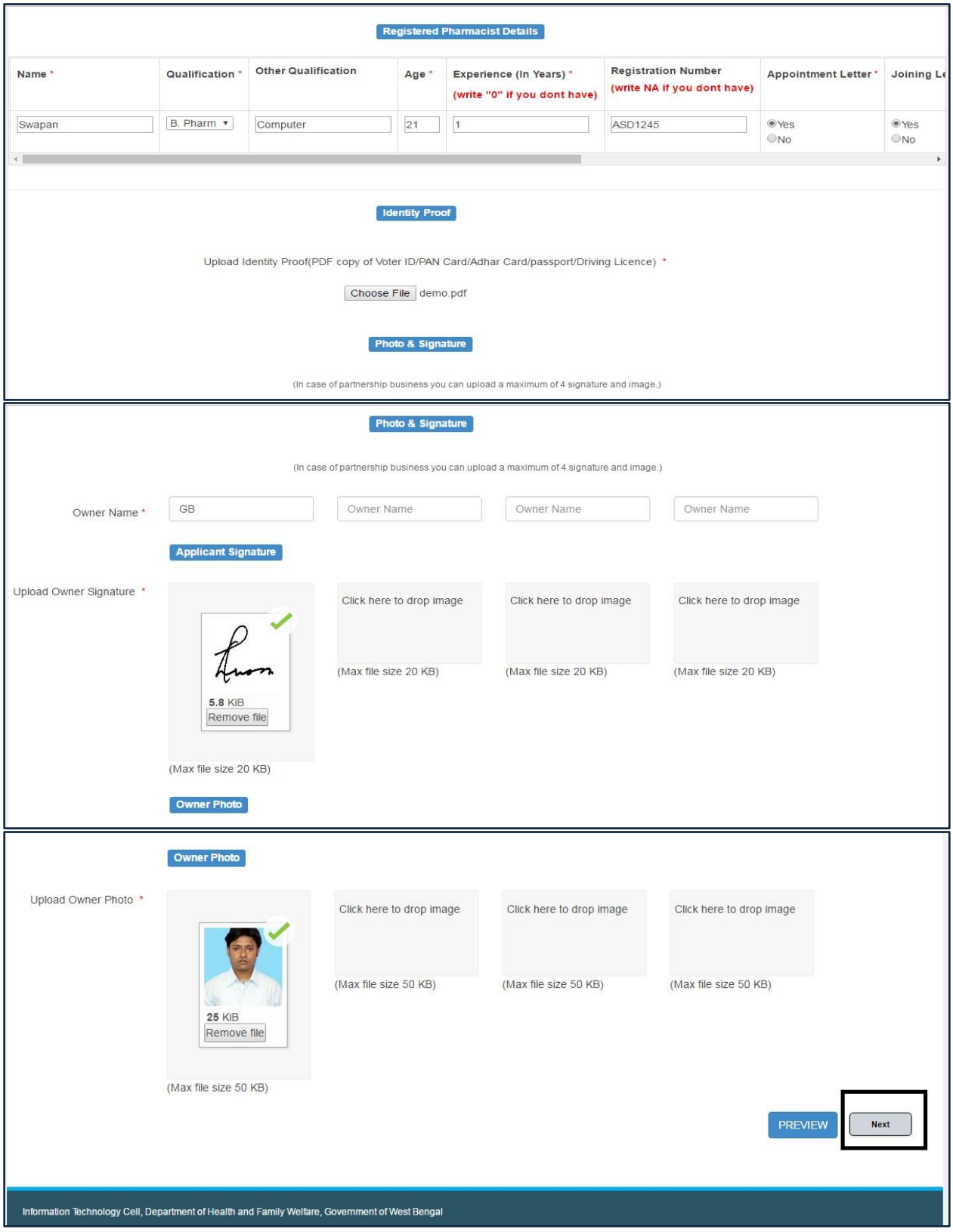
8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * — Yes / No

9. Whether Refrigerator has been installed to stock for sale Drugs requiring Cold storage. If so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * — Yes / No

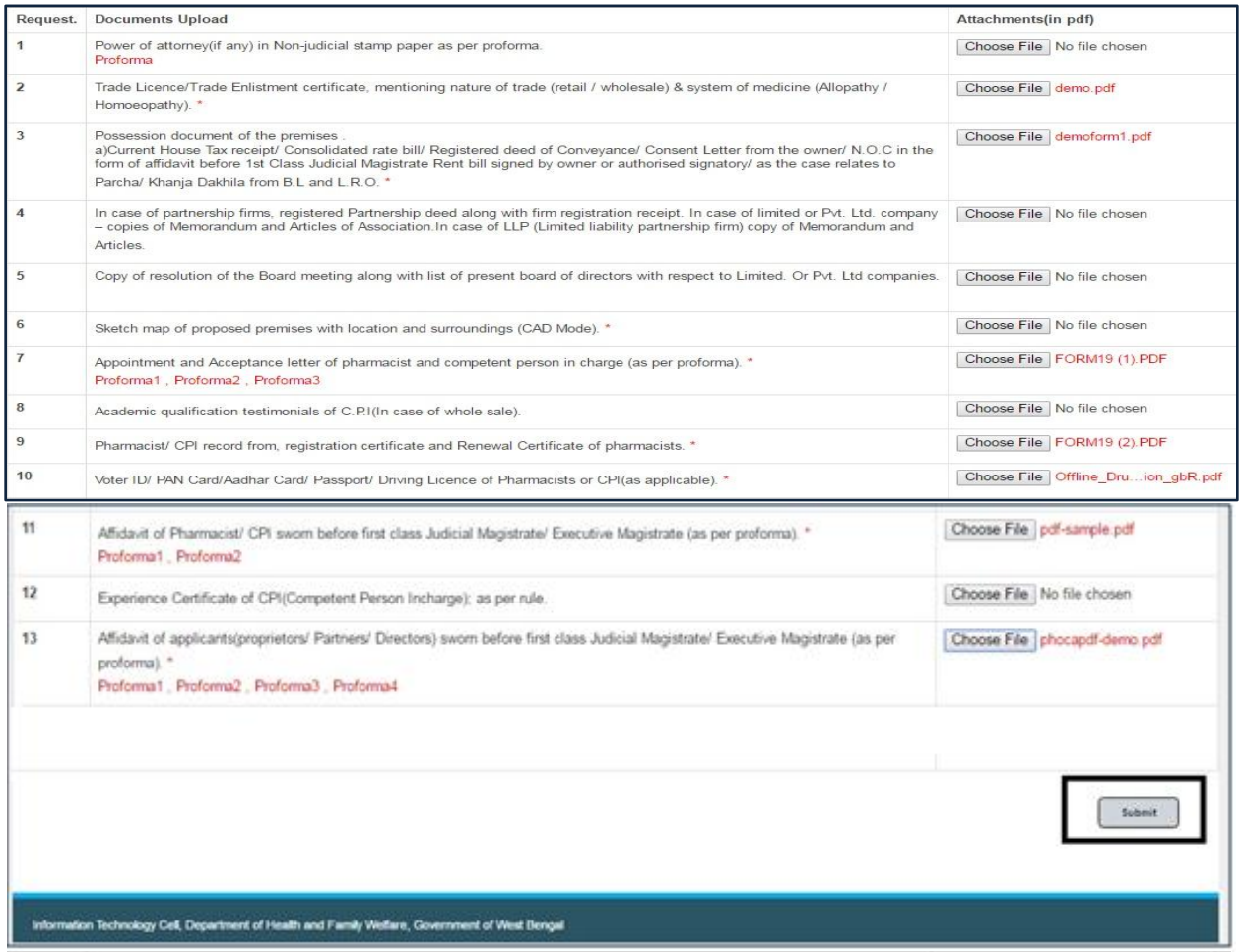
10. Working Hour	12	11. Weekly Closing Day	Monday (Please provide any day of the week. like Sunday,Monday.....)
12. Total Working days (in a week)	6		

PREV PREVIEW NEXT

Step 5: Enter registered Pharmacist details. Upload identity proof, photo and signature.



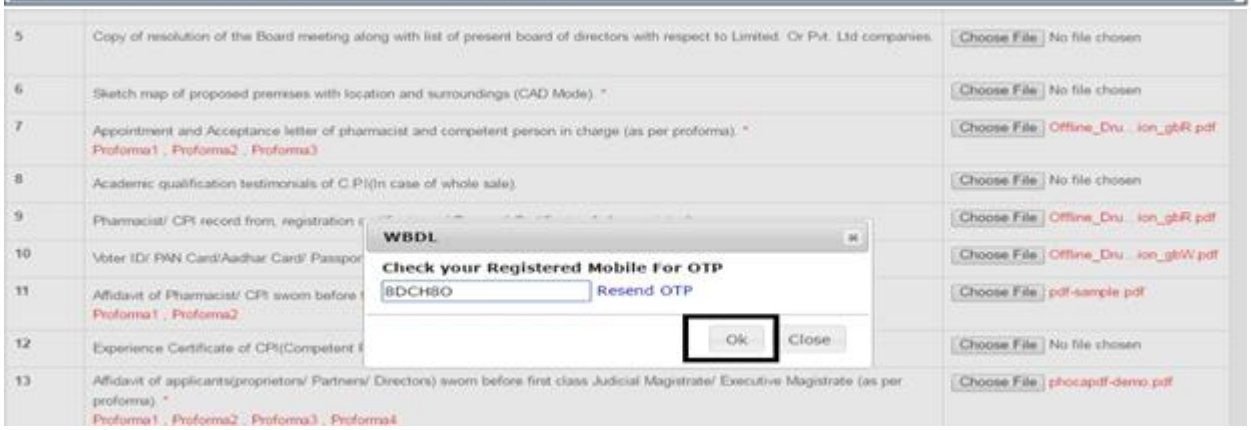
Step 6: Upload all necessary documents. The necessary items are highlighted in red. Once the documents are uploaded and Submit button is clicked an OTP is generated which is sent to the registered phone number of the user. Enter the OTP and click ok to proceed.



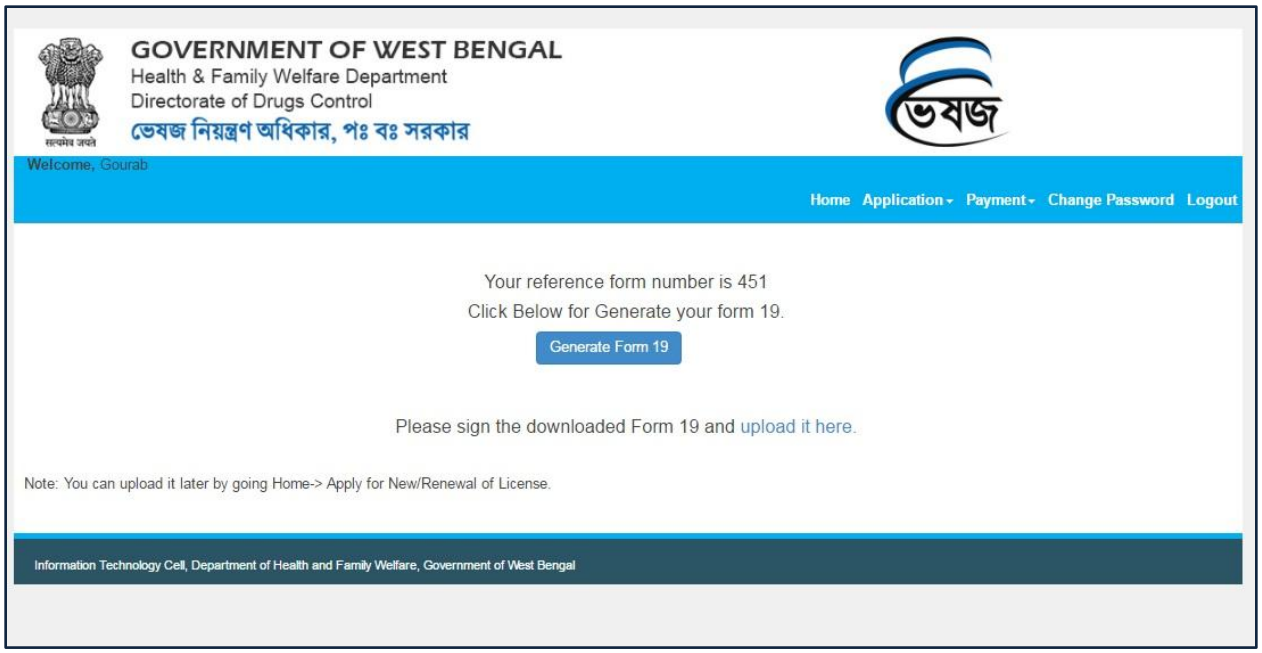
Request.	Documents Upload	Attachments(in pdf)
1	Power of attorney(if any) in Non-judicial stamp paper as per proforma. Proforma	Choose File No file chosen
2	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy). *	Choose File demo.pdf
3	Possession document of the premises . a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O. *	Choose File demoform1.pdf
4	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
5	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies.	Choose File No file chosen
6	Sketch map of proposed premises with location and surroundings (CAD Mode). *	Choose File No file chosen
7	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma). * Proforma1 , Proforma2 , Proforma3	Choose File FORM19 (1).PDF
8	Academic qualification testimonials of C.P.I(In case of whole sale).	Choose File No file chosen
9	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists. *	Choose File FORM19 (2).PDF
10	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable). *	Choose File Offline_Dru...ion_gbR.pdf
11	Affidavit of Pharmacist/ CPI swom before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2	Choose File pdf-sample.pdf
12	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
13	Affidavit of applicants(proprietors/ Partners/ Directors) swom before first class Judicial Magistrate/ Executive Magistrate (as per proforma). * Proforma1 , Proforma2 , Proforma3 , Proforma4	Choose File phocapdf-demo.pdf

Submit

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal



Step 7: Once the application is successful the User arrives at the Form 19 Generation screen. Here the user has to click the “Generate Form 19” button to download form 19.



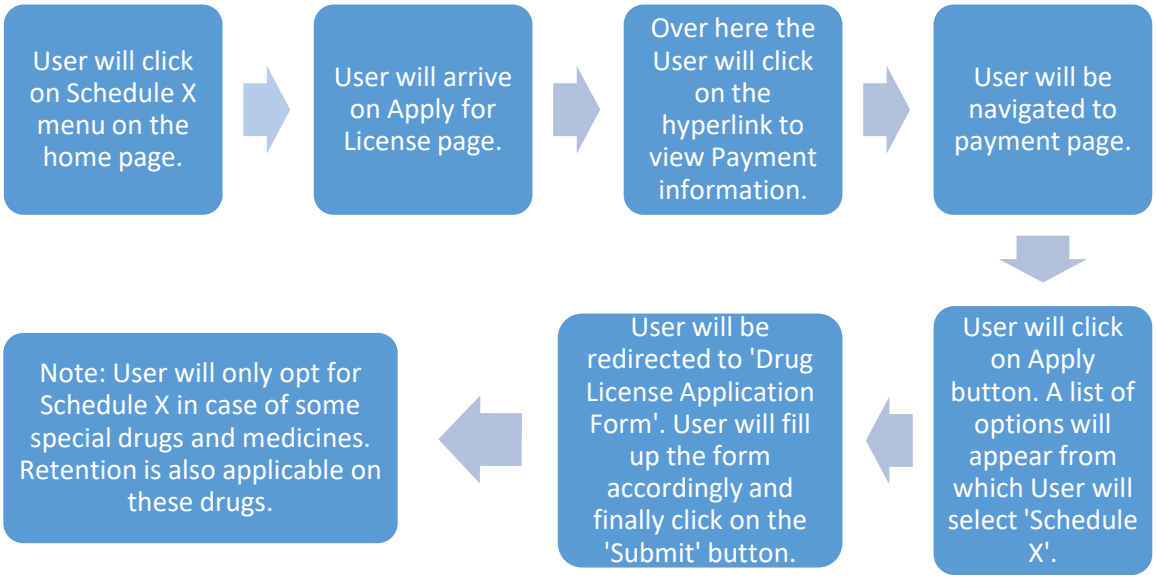
Step 8: Sign the Form 19 and upload back into the system. When this is done the user is directed to the payment screen.

Note: As the User successfully applies for Change in Proprietorship the duration of the validity of the application is changed automatically and now is calculated from the date of the change applied.

16 Schedule X Applications

User will click on Schedule X menu on the home page. User will arrive on Apply for License page. Over here the User will click on the hyperlink to view Payment information. User will be navigated to payment page. User will click on Apply button. A list of options will appear from which User will select 'Schedule X'. User will be redirected to 'Drug License Application Form'. User will fill up the form accordingly and finally click on the 'Submit' button. Note: User will only opt for Schedule X in case of some special drugs and medicines. Also User required bio and non bio both valid license to apply. Retention is also applicable on these drugs.

16.1 Process Flow



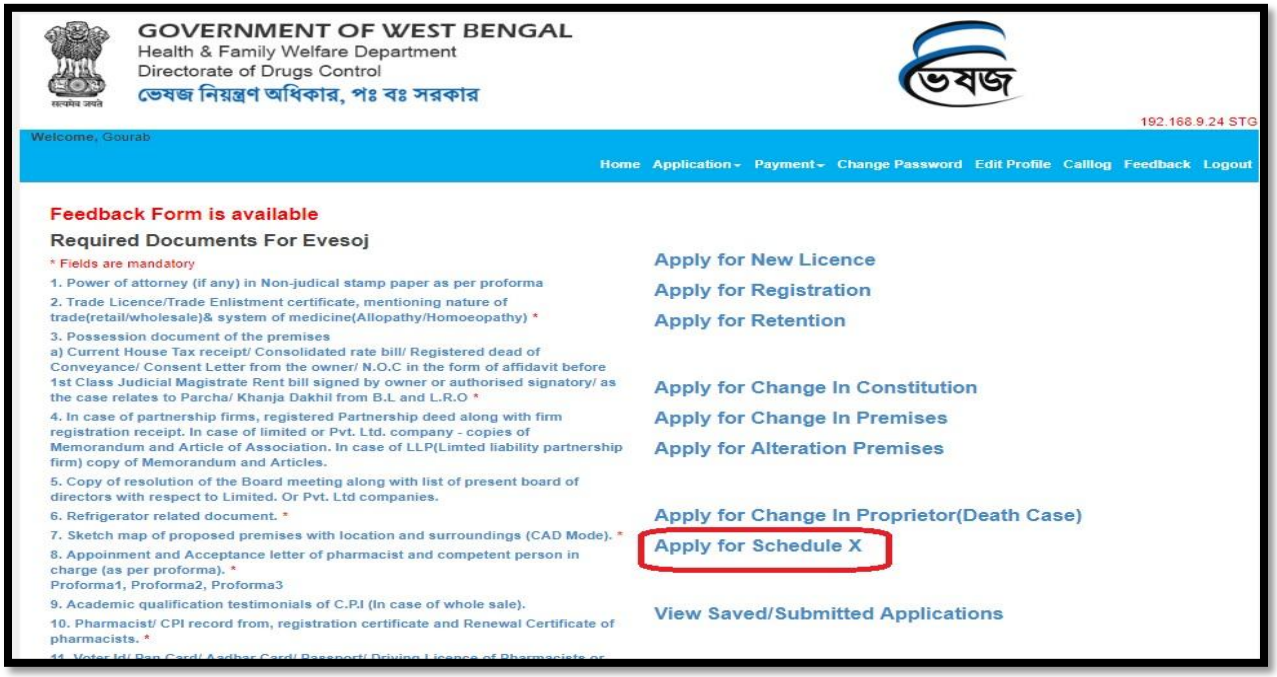
16.2 Detailed Steps

- User will click on Schedule X menu on the home page.
- User will arrive on Apply for License page.
- Over here the User will click on the hyperlink to view Payment information.
- User will be navigated to payment page.
- User will click on Apply button. A list of options will appear from which User will select 'Schedule X'.
- User will be redirected to 'Drug License Application Form'. User will fill up the form accordingly and finally click on the 'Submit' button.

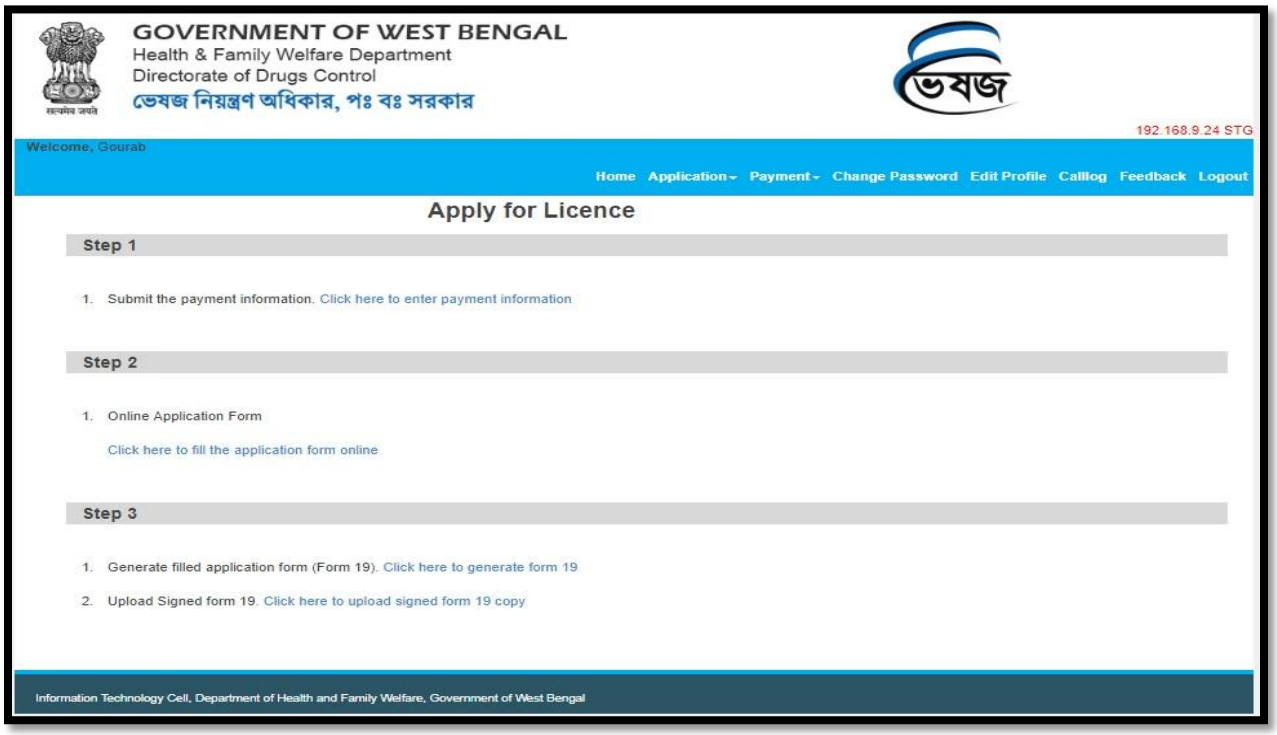
- Note: User will only opt for Schedule X in case of some special drugs and medicines. Retention is also applicable on these drugs.

16.3 Screenshot View

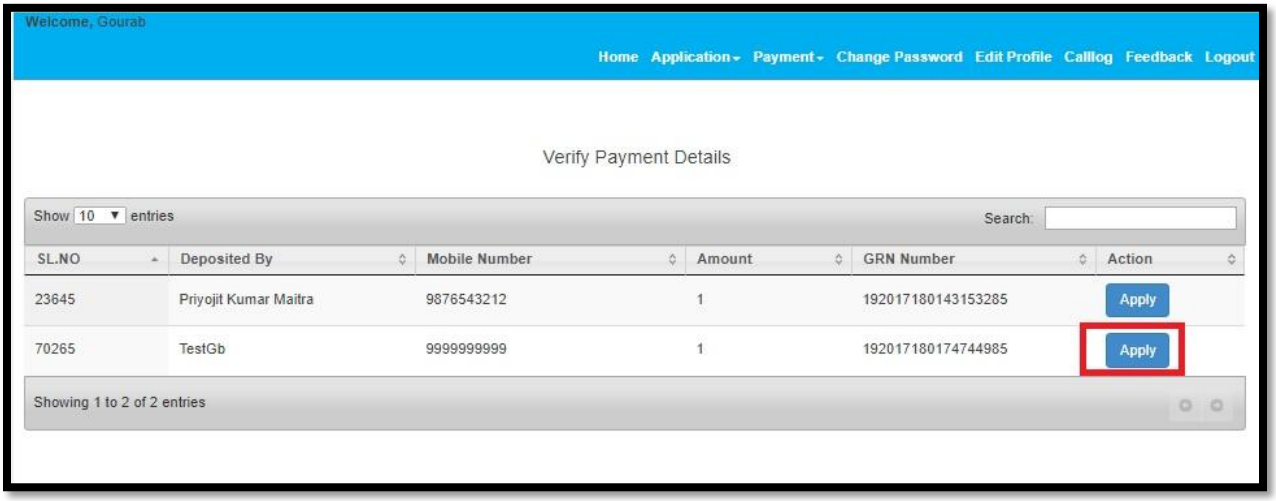
User will click on Schedule X menu on the home page.



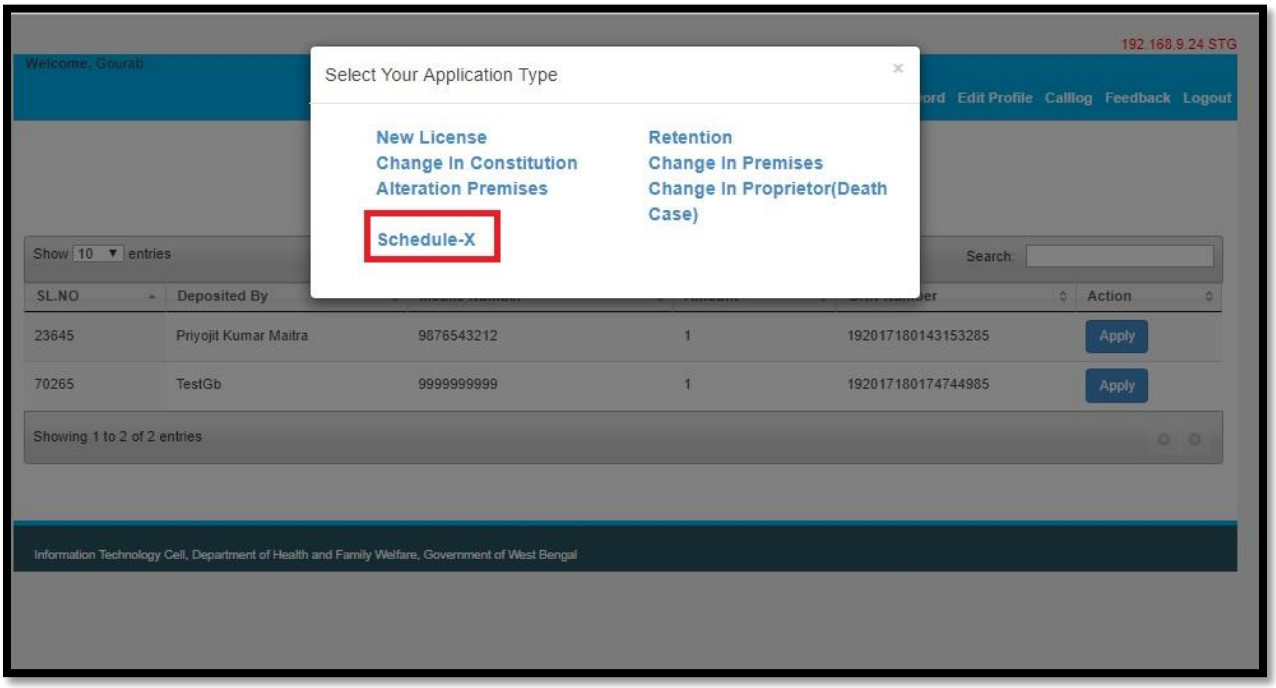
User will arrive on Apply for License page. Over here the User will click on the hyperlink to view Payment information.



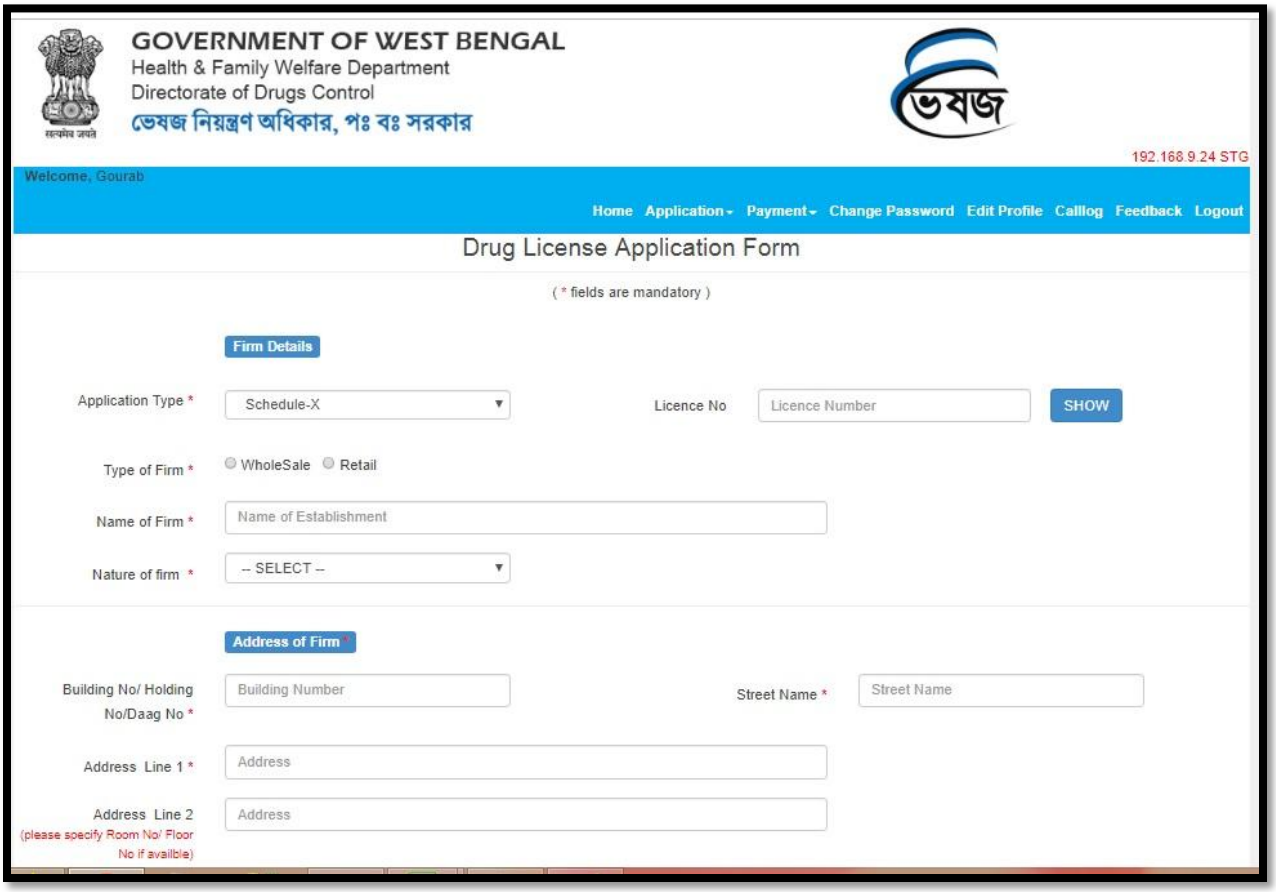
User will be navigated to payment page. User will click on Apply button.

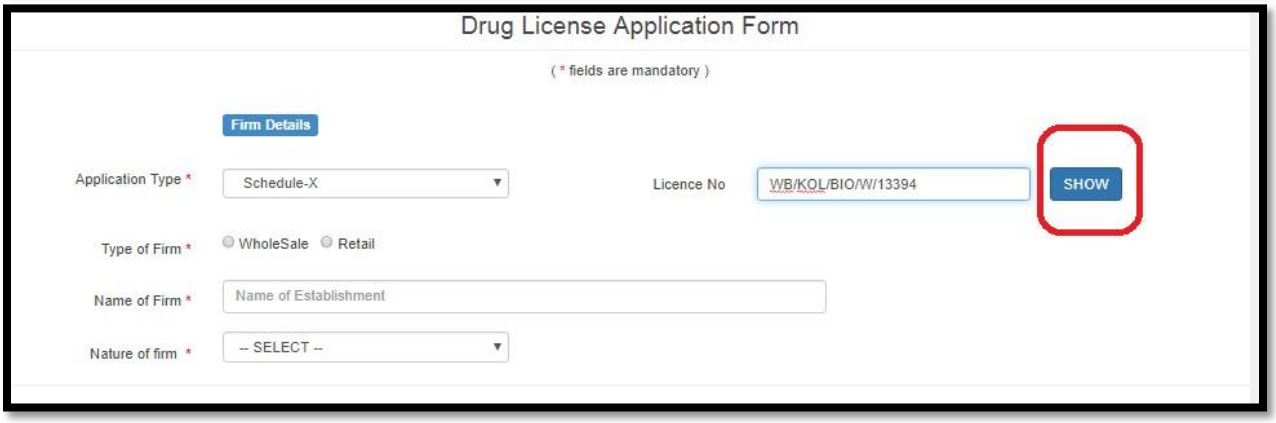


A list of options will appear from which User will select 'Schedule X'.



User will be redirected to 'Drug License Application Form'. User will fill up the form accordingly and finally click on the 'Submit' button. Note: User will only opt for Schedule X in case of some special drugs and medicines. Retention is also applicable on these drugs





Drug License Application Form

(* fields are mandatory)

Firm Details

Application Type * : Schedule-X

Licence No : WB/KOL/BIO/W/13394 SHOW

Type of Firm * : WholeSale Retail

Name of Firm * : M/S BISWAS ENTERPRISE

Nature of firm * : Partnership

Address of Firm

Building No/ Holding No/Daag No * : 55

Street Name * : B.R.B.BASU ROAD

Address Line 1 * : ROOM NO-57

Address Line 2 (please specify Room No/ Floor No if availble) : Address

District * : Central Kolkata

Post Office For Kolkata : Kolkata GPO

Police Station : HARE STREET

City/Village * : KOLKATA

Pin Code * : 700001

Local Authority * : KMA

Contact Details of establishment

Email ID * : biswasenterprise.kolkata@gmail.com

Landline : Landline (ex:033-xxxx-xxxx)

Mobile * : 9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted :

Modification of Credentials* : Not Applicable

Service Details

Categories of drugs to be sold * : Schedule X

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises : Yes No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory :

Actual floor space area* (Min 108 sq.ft) : 128 sqft.

Height from floor to ceiling : 14 ft.

Trade Licence : Applied for Licence Available

Trade Licence No : Licence Number

NEXT

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * Brick Built. Plastered and Floor Cemented Roofing and Ceiling

2. Nature of Ceiling * RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Rented

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 8

11. Weekly Closing Day SUNDAY

(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

PREV PREVIEW NEXT

Registered Pharmacist Details

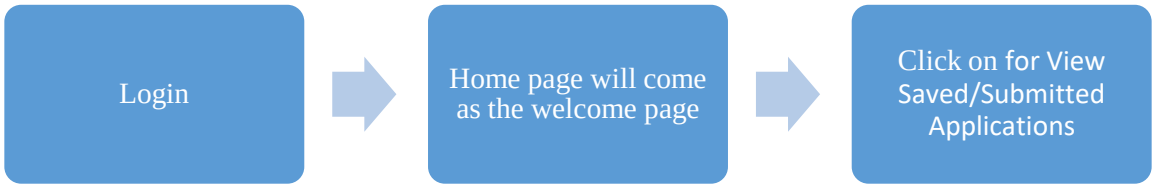
Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joining Letter *	Educational Certificat

Submit

17 View Saved/Submitted Applications

You will get this page after login. Here, you have Click View Saved/Submitted Applications and view the application which you are already submitted.

17.1 Process Flow



17.2 Detailed Steps

1. Login to the application
2. Home page will come as the welcome page.
3. Click on for View Saved/Submitted Applications.
4. Click Action Button and options list and also update Edit Pharmacists, Edit Attachments, and Edit application not permitted.

17.3 Screenshot View

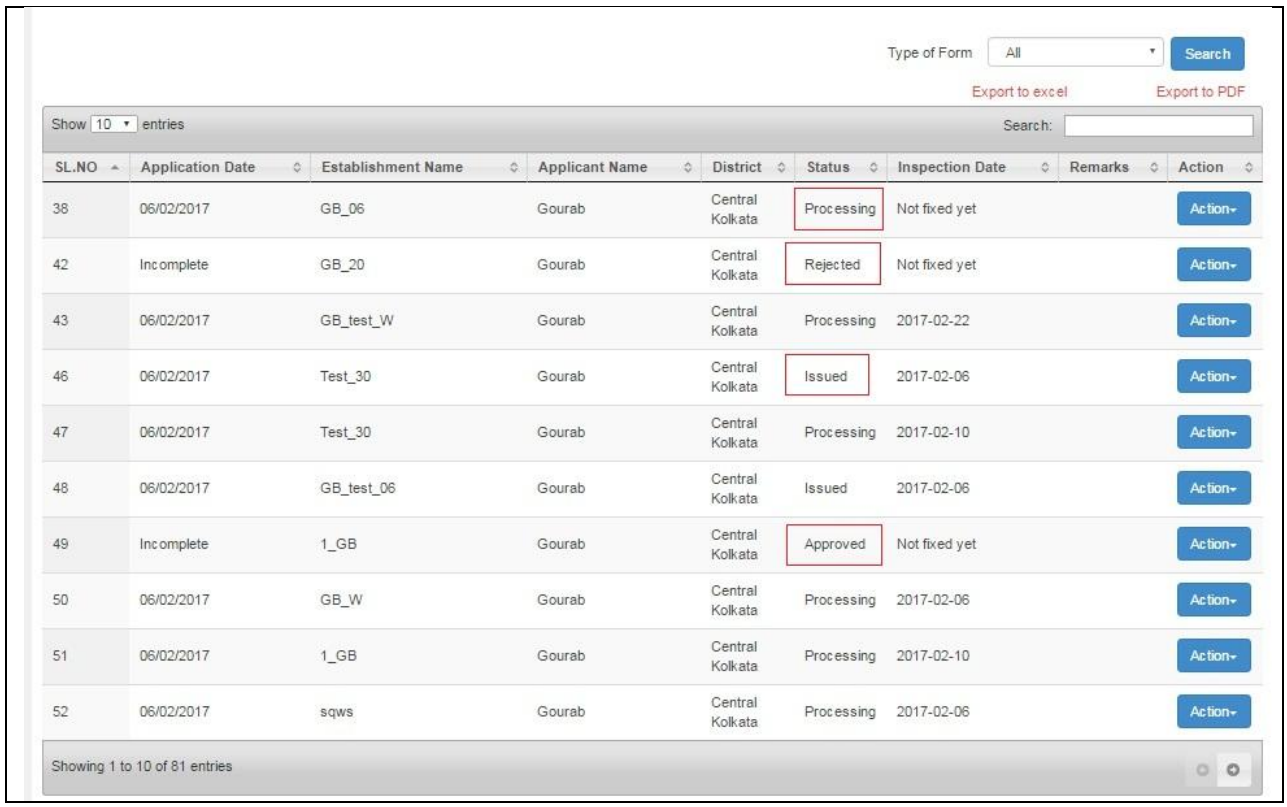
Step 1: User will click on “View Saved/ Submitted Application”

Step 2: User will view a list of submitted application with these following fields (SL. /Application No, Application Date, Establishment Name, Applicant Name, District, Status, Inspection Date, Remarks, Action). In the form status will view the current status of application. Such as processing status indicates application is not completed by either user or ant Licensing authority, issued and approved application indicated that license are issued and rejected status indicates the license is rejected by licensing authority. Action button will be shown blank by default but once Inspection authority permits user to allow edit it will be activated and user can modify some fields accordingly.

However, while re inspecting if the license authority is not satisfied with the modifications he may request the inspection authority to once again activate the 'Action' button so that the User may rectify the errors once again.

The LA can Show cause the User if not satisfied with the details submitted. On being show caused the user will have to reply back with show caused documents. User receives a mail if any defect is found in inspection. A period of 15 days is given to the User to revert back. If User rectifies and replies back within the time period in mail with attachment then the application is sent for hearing. If the User fails to respond within time period he is given a reminder for the same time period. If the User fails to respond for the 2nd time the application is rejected.

After submission a hearing will take place at the court. After the hearing the LA if satisfied will issue the License otherwise reject it.



SL.NO	Application Date	Establishment Name	Applicant Name	District	Status	Inspection Date	Remarks	Action
38	06/02/2017	GB_06	Gourab	Central Kolkata	Processing	Not fixed yet		Action
42	Incomplete	GB_20	Gourab	Central Kolkata	Rejected	Not fixed yet		Action
43	06/02/2017	GB_test_W	Gourab	Central Kolkata	Processing	2017-02-22		Action
46	06/02/2017	Test_30	Gourab	Central Kolkata	Issued	2017-02-06		Action
47	06/02/2017	Test_30	Gourab	Central Kolkata	Processing	2017-02-10		Action
48	06/02/2017	GB_test_06	Gourab	Central Kolkata	Issued	2017-02-06		Action
49	Incomplete	1_GB	Gourab	Central Kolkata	Approved	Not fixed yet		Action
50	06/02/2017	GB_W	Gourab	Central Kolkata	Processing	2017-02-06		Action
51	06/02/2017	1_GB	Gourab	Central Kolkata	Processing	2017-02-10		Action
52	06/02/2017	sqws	Gourab	Central Kolkata	Processing	2017-02-06		Action

Step 3: Below screenshot showing the action menu is blank which indicates either the license is issued or the application edit is not permitted from IA.

Type of Form All Search

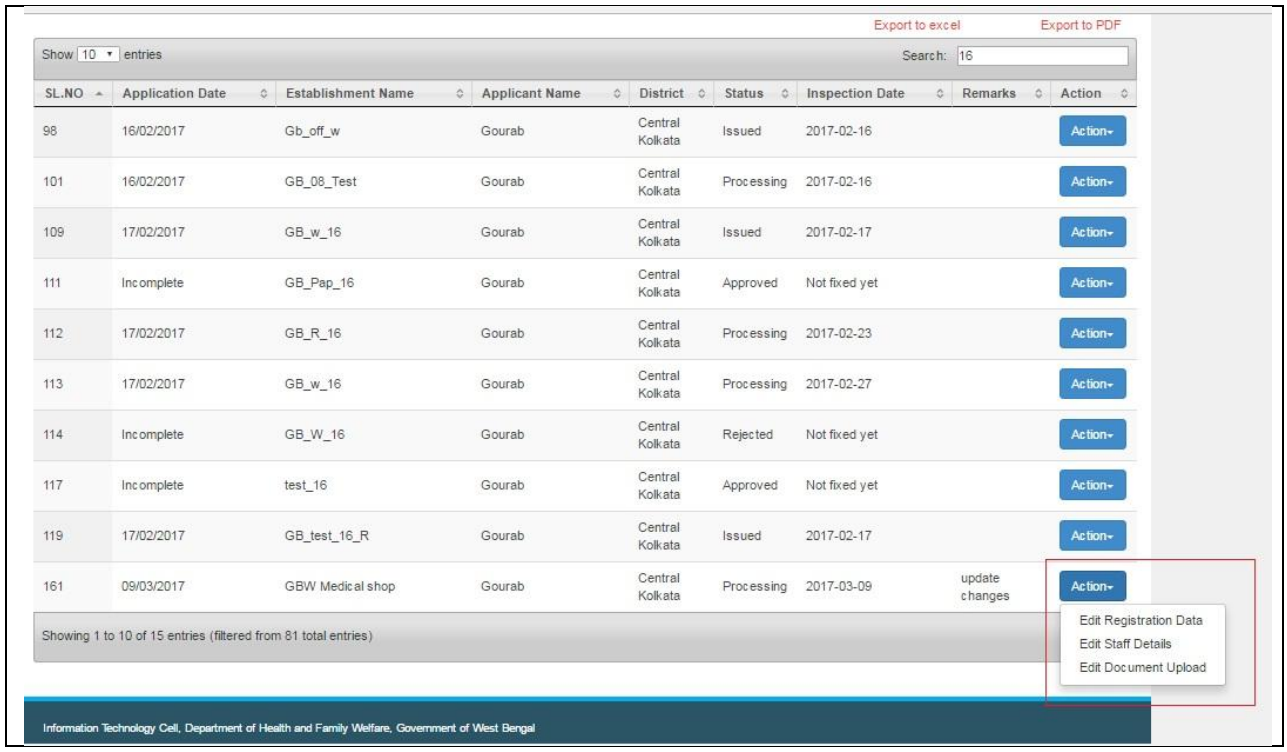
Export to excel Export to PDF

Show 10 entries Search: 16

SL.NO	Application Date	Establishment Name	Applicant Name	District	Status	Inspection Date	Remarks	Action
98	16/02/2017	Gb_off_w	Gourab	Central Kolkata	Issued	2017-02-16		Action
101	16/02/2017	GB_08_Test	Gourab	Central Kolkata	Processing	2017-02-16		Action
109	17/02/2017	GB_w_16	Gourab	Central Kolkata	Issued	2017-02-17		Action
111	Incomplete	GB_Pap_16	Gourab	Central Kolkata	Approved	Not fixed yet		Action
112	17/02/2017	GB_R_16	Gourab	Central Kolkata	Processing	2017-02-23		Action
113	17/02/2017	GB_w_16	Gourab	Central Kolkata	Processing	2017-02-27		Action
114	Incomplete	GB_W_16	Gourab	Central Kolkata	Rejected	Not fixed yet		Action
117	Incomplete	test_16	Gourab	Central Kolkata	Approved	Not fixed yet		Action
119	17/02/2017	GB_test_16_R	Gourab	Central Kolkata	Issued	2017-02-17		Action
161	09/03/2017	GBW Medical shop	Gourab	Central Kolkata	Processing	2017-03-09	update changes	Action

Showing 1 to 10 of 15 entries (filtered from 81 total entries)

Step 4: User will check the remarks from IA and edit the submitted application form. User will edit the application from in 3 part and they are Edit Registration Data, Edit Staff Details, and Edit Document Upload. Each submits will disable the options (Edit Registration Data, Edit Staff Details and Edit Document Upload).



Step One: Edit Registration Data

User will click on “Edit Registration Data “button and it will show the populated fill up form of first page

Drug Application Form

(* fields are mandatory)

Firm Details

Application Type * New License

Type of Firm * WholeSale Retail

Name of Firm * GBW Medical shop

Nature of firm * Partnership

Address of Firm *

Building No/ Holding No/Daag No * 12

Street Name * Santon Street

Address Line 1 * Behala Thana

Address Line 2 Address

District * Central Kolkata

Post Office for Kolkata * Kolkata GPO

Police Station for Kolkata * GP Thana

City/Village * Kolkata

Pin Code * 700009

Local Authority * KMA

Contact Details of establishment

Email ID * banerjee.gourab08@gmail.com

Landline 22242525 Mobile * 9874481064

Qualification of the person responsible for operation if granted test

Modification of Credentials* Not Applicable Existing

Service Details

Categories of drugs to be sold * Both

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises Yes No

Location and Direction (Rly. Station).Bus Route and the Stoppage nearest and brief directory This is test 2

Actual floor space area 108 sqft. Height from floor to ceiling 10 ft.

Trade License Applied for License Available

Trade Licence No 123456

NEXT

Additional Information Form for Grant of Licenses to Sell Drugs

Application for Grant or Renewal of a License to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). This is edited text

2. Nature of Ceiling RCC

3. Trade Licences / Tax Receipt from the Local Govt/Panchayat has been enclosed Yes No

4. Do you have any other Drug License? Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type Owned by Applicant

7. Is it for an application due to change in constitution of a Licensed Firm? If so, please note the date of such change and manner. Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? Yes No

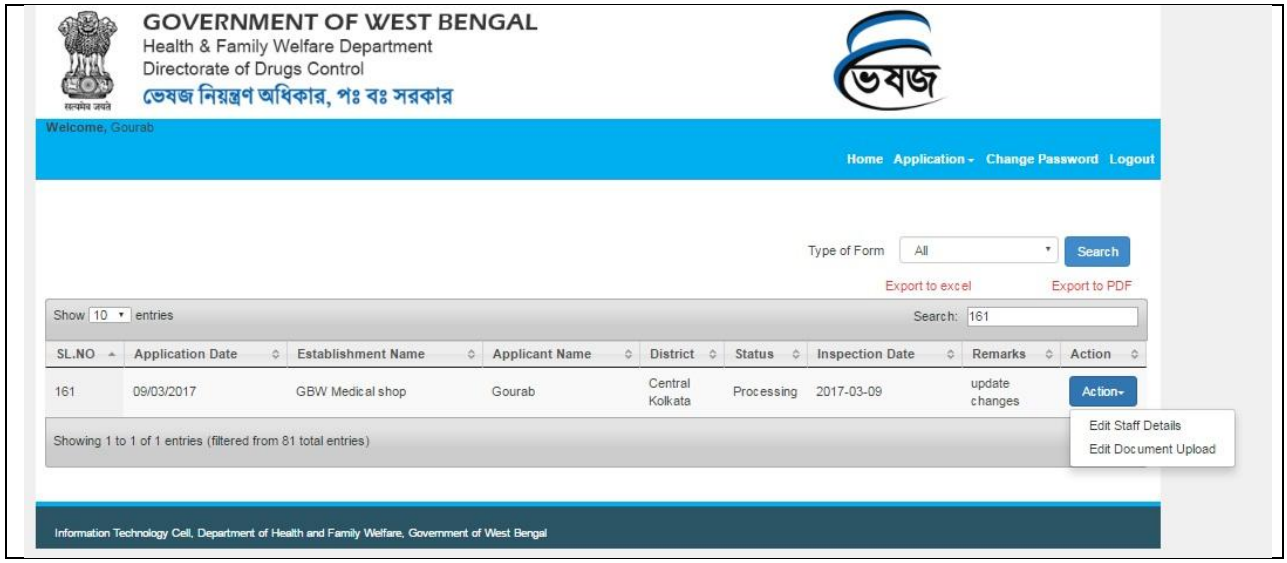
9. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? Yes No

10. Working Hour 14 11. Weekly Closing Day Saturday

12. Total Working days 6

PREV SUBMIT

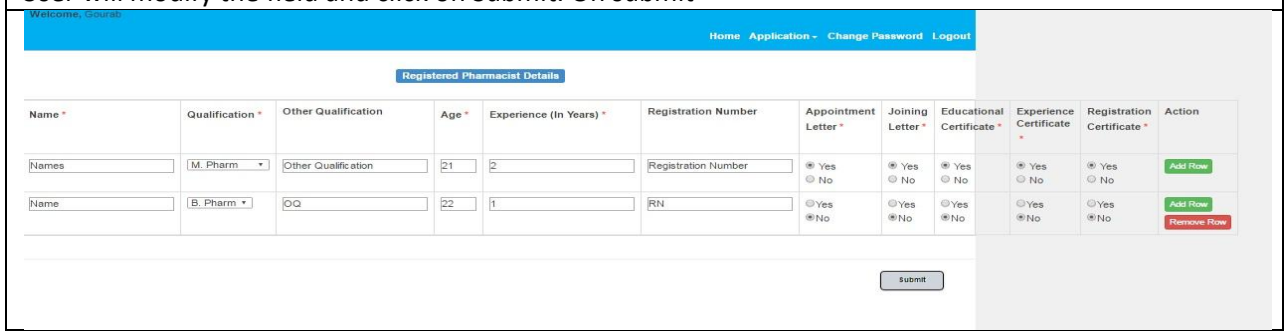
After User submits the edited form it will not show again in the Action button as shown in below screenshot.



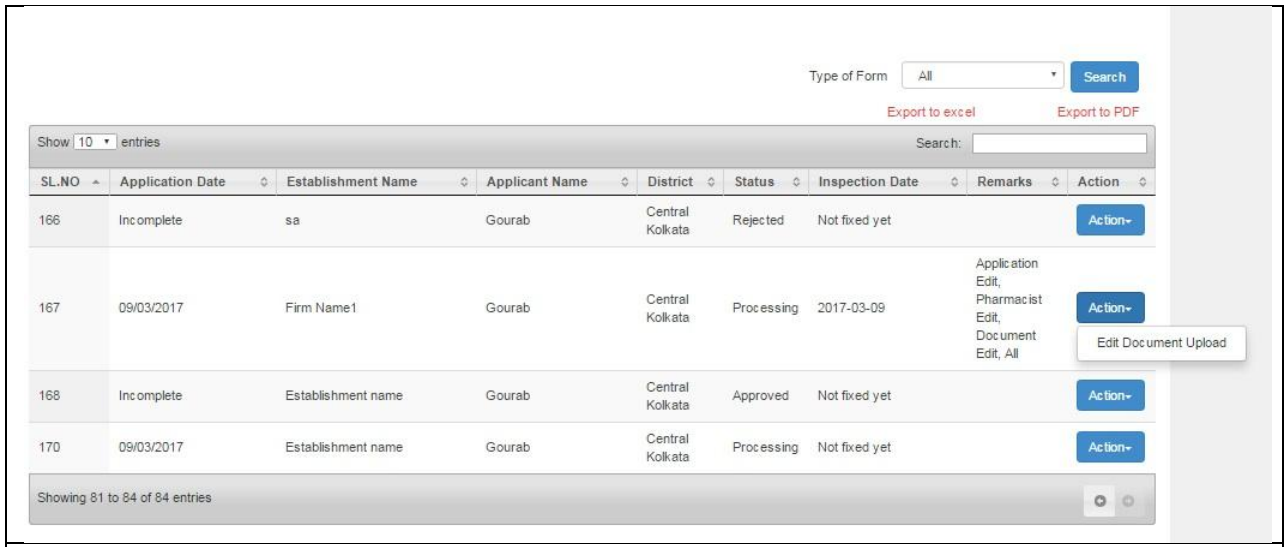
Step 2: Edit Staff Details

User will now edit the staff details by clicking the button “Edit Staff Details”.

User will modify the field and click on Submit. On submit



Step 3: Edit Document Upload



Type of Form All Search

Export to excel Export to PDF

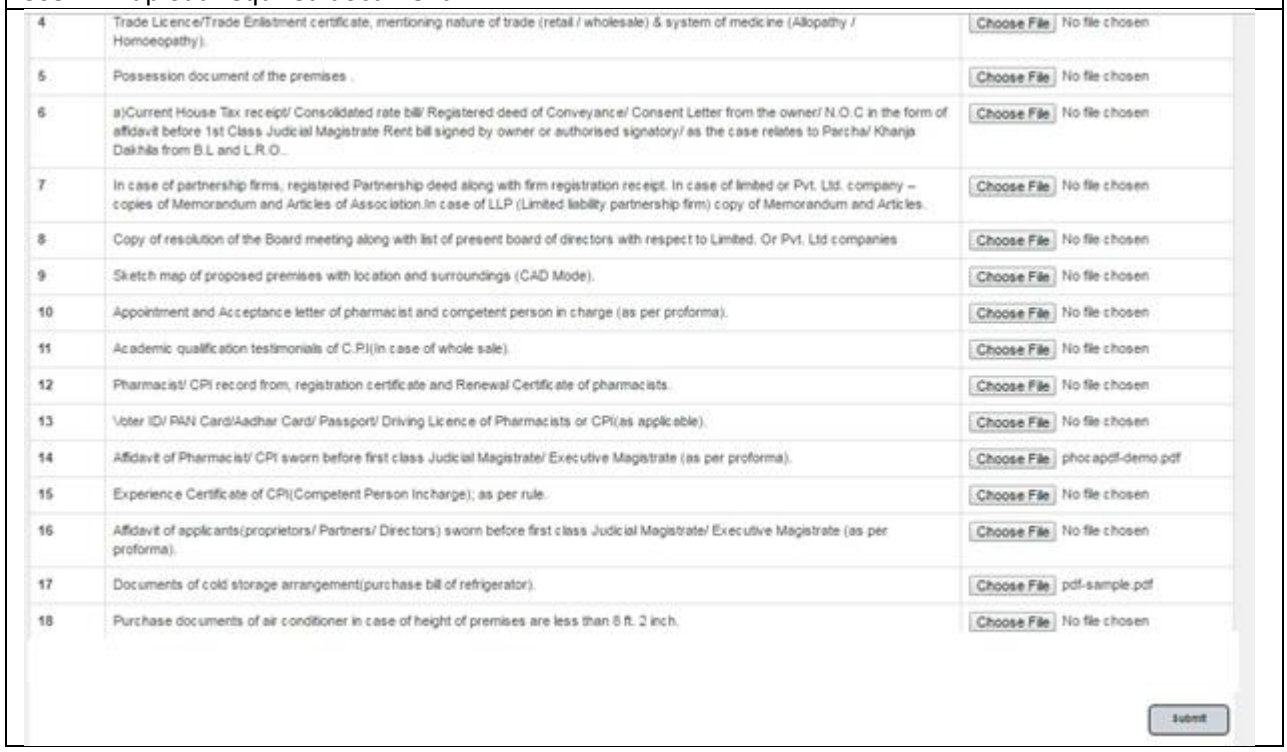
Show 10 entries Search:

SL.NO	Application Date	Establishment Name	Applicant Name	District	Status	Inspection Date	Remarks	Action
166	Incomplete	sa	Gourab	Central Kolkata	Rejected	Not fixed yet		Action
167	09/03/2017	Firm Name1	Gourab	Central Kolkata	Processing	2017-03-09	Application Edit, Pharmacist Edit, Document Edit, All	Action
168	Incomplete	Establishment name	Gourab	Central Kolkata	Approved	Not fixed yet		Action
170	09/03/2017	Establishment name	Gourab	Central Kolkata	Processing	Not fixed yet		Action

Edit Document Upload

Showing 81 to 84 of 84 entries

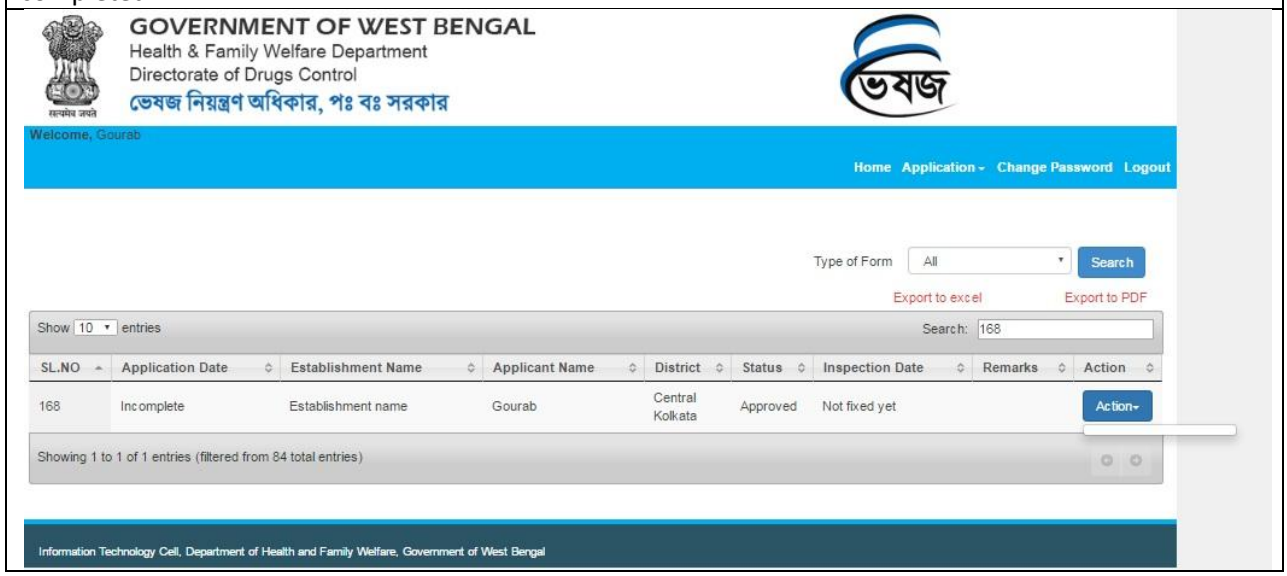
User will upload required document



4	Trade Licence/Trade Enlistment certificate, mentioning nature of trade (retail / wholesale) & system of medicine (Allopathy / Homoeopathy).	Choose File No file chosen
5	Possession document of the premises .	Choose File No file chosen
6	a)Current House Tax receipt/ Consolidated rate bill/ Registered deed of Conveyance/ Consent Letter from the owner/ N.O.C in the form of affidavit before 1st Class Judicial Magistrate Rent bill signed by owner or authorised signatory/ as the case relates to Parcha/ Khanja Dakhila from B.L and L.R.O.	Choose File No file chosen
7	In case of partnership firms, registered Partnership deed along with firm registration receipt. In case of limited or Pvt. Ltd. company – copies of Memorandum and Articles of Association.In case of LLP (Limited liability partnership firm) copy of Memorandum and Articles.	Choose File No file chosen
8	Copy of resolution of the Board meeting along with list of present board of directors with respect to Limited. Or Pvt. Ltd companies	Choose File No file chosen
9	Sketch map of proposed premises with location and surroundings (CAD Mode).	Choose File No file chosen
10	Appointment and Acceptance letter of pharmacist and competent person in charge (as per proforma).	Choose File No file chosen
11	Academic qualification testimonials of C.P.I(in case of whole sale).	Choose File No file chosen
12	Pharmacist/ CPI record from, registration certificate and Renewal Certificate of pharmacists.	Choose File No file chosen
13	Voter ID/ PAN Card/Aadhar Card/ Passport/ Driving Licence of Pharmacists or CPI(as applicable).	Choose File No file chosen
14	Affidavit of Pharmacist/ CPI sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma).	Choose File phocapdf-demo.pdf
15	Experience Certificate of CPI(Competent Person Incharge); as per rule.	Choose File No file chosen
16	Affidavit of applicants(proprietors/ Partners/ Directors) sworn before first class Judicial Magistrate/ Executive Magistrate (as per proforma).	Choose File No file chosen
17	Documents of cold storage arrangement(purchase bill of refrigerator).	Choose File pdf-sample.pdf
18	Purchase documents of air conditioner in case of height of premises are less than 8 ft. 2 inch.	Choose File No file chosen

Submit

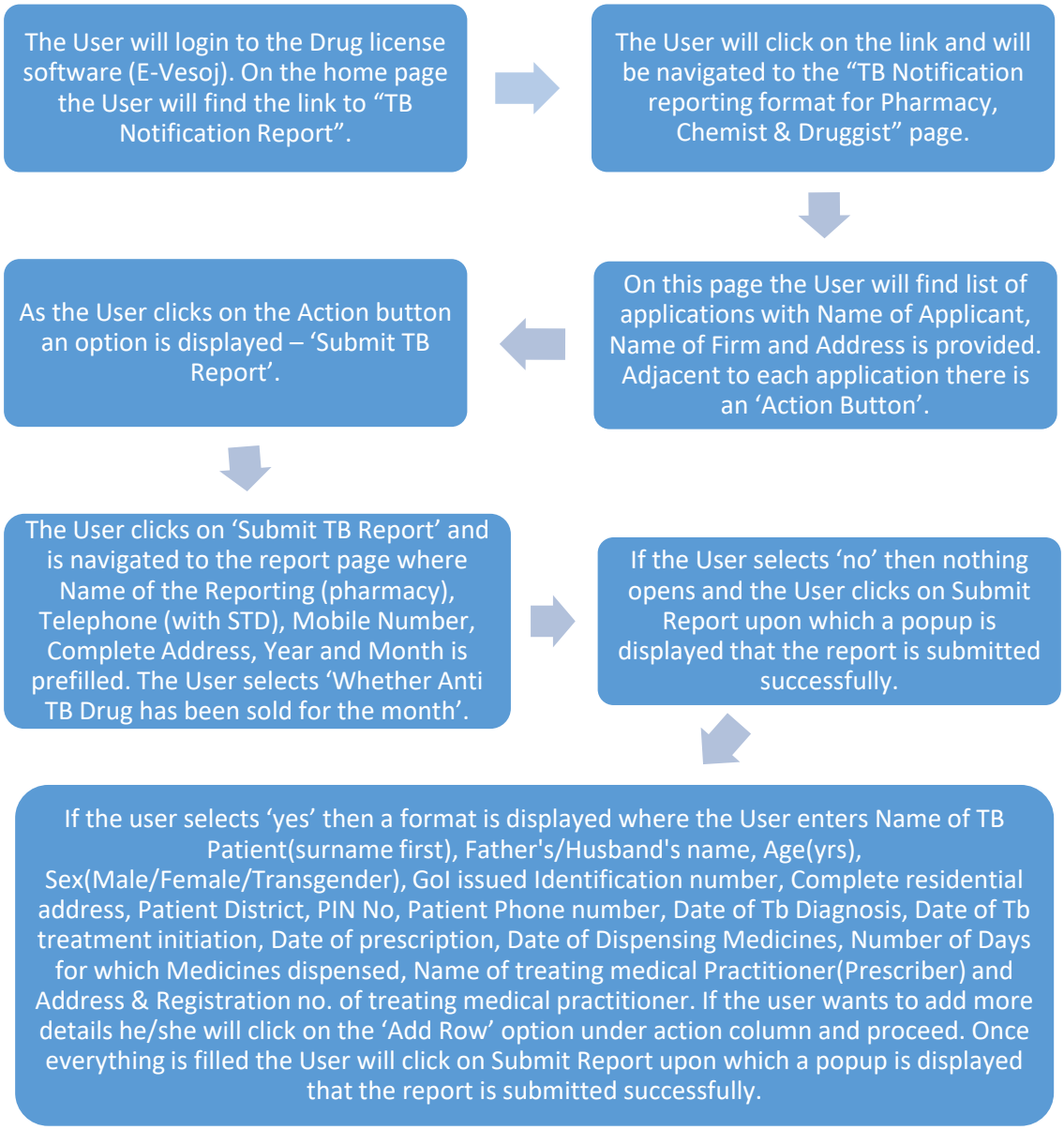
Upon submit user cannot modify it further. User will get the below mentioned output after editing completed



18 TB Notification Report

The TB Notification Report has been introduced so that pharmacies or Drug dispensing units across the state will be able to collect information about TB patients in their areas which in turn will help the Govt. to monitor the number of TB patients under its jurisdiction. To do this the User will login to the Drug license software (E-Vesoj). On the home page the User will find the link to “TB Notification Report”. The User will click on the link and will be navigated to the “TB Notification reporting format for Pharmacy, Chemist & Druggist” page. On this page the User will find list of applications with Name of Applicant, Name of Firm and Address is provided. Adjacent to each application there is an ‘Action Button’. As the User clicks on the Action button an option is displayed – ‘Submit TB Report’. The User clicks on ‘Submit TB Report’ and is navigated to the report page where Name of the Reporting (pharmacy), Telephone (with STD), Mobile Number, Complete Address, Year and Month is prefilled. The User selects ‘Whether Anti TB Drug has been sold for the month’. If the User selects ‘no’ then nothing opens and the User clicks on Submit Report upon which a popup is displayed that the report is submitted successfully. If the user selects ‘yes’ then a format is displayed where the User enters Name of TB Patient(surname first), Father's/Husband's name, Age(yrs), Sex(Male/Female/Transgender), GoI issued Identification number, Complete residential address, Patient District, PIN No, Patient Phone number, Date of Tb Diagnosis, Date of Tb treatment initiation, Date of prescription, Date of Dispensing Medicines, Number of Days for which Medicines dispensed, Name of treating medical practitioner(Prescriber) and Address & Registration no. of treating medical practitioner. If the user wants to add more details he/she will click on the ‘Add Row’ option under action column and proceed. Once everything is filled the User will click on Submit Report upon which a popup is displayed that the report is submitted successfully.

18.1 Process Flow

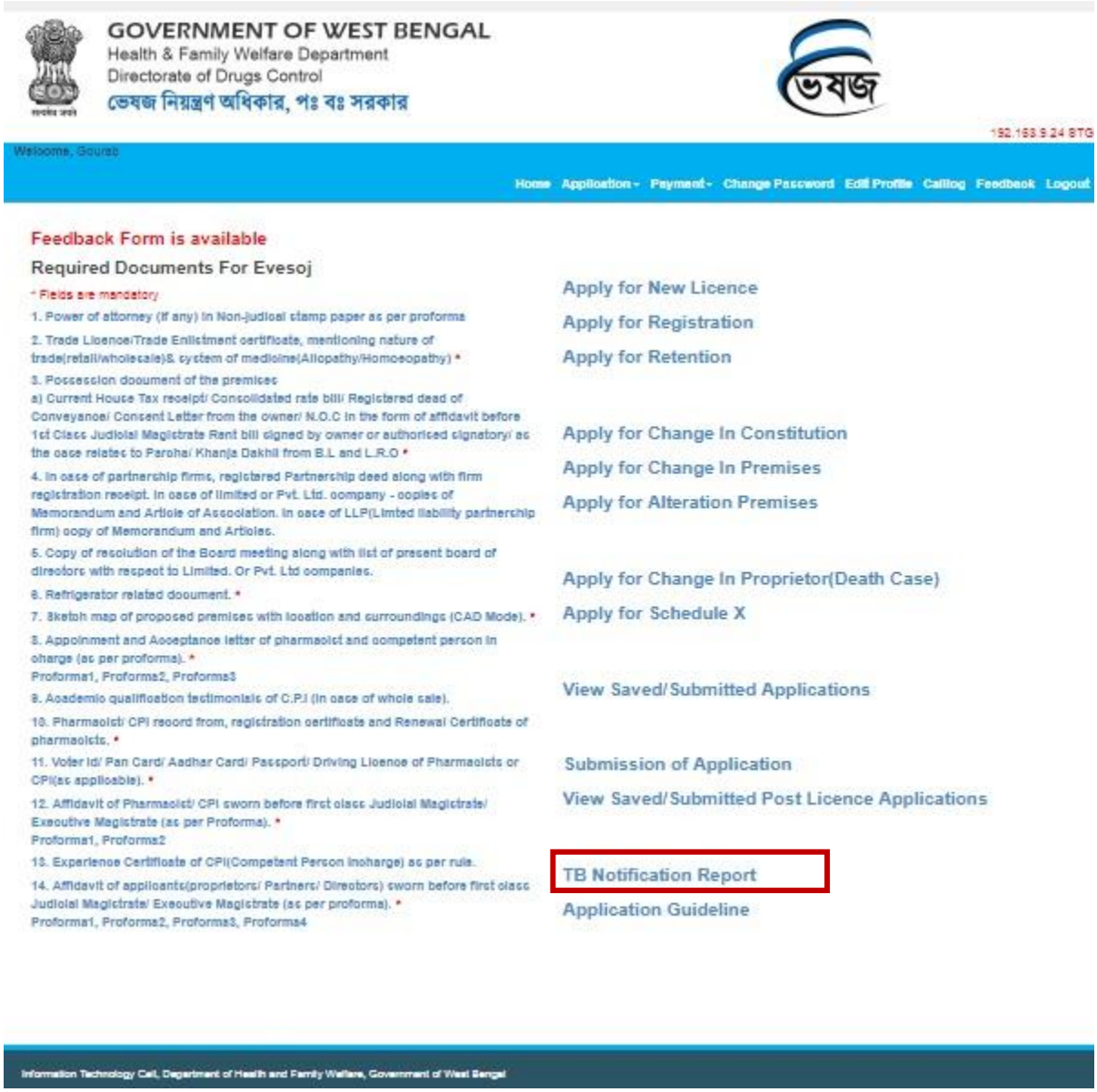


18.2 Detailed Steps

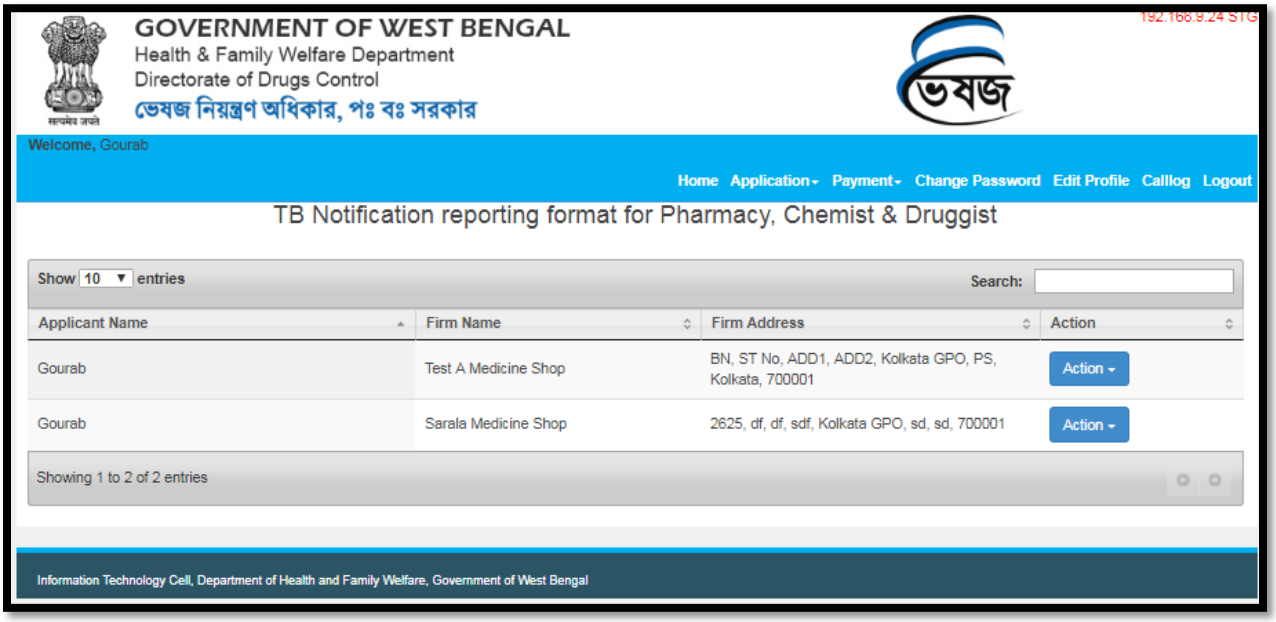
1. The User will login to the Drug license software (E-Vesoj). On the home page the User will find the link to “TB Notification Report”.
2. The User will click on the link and will be navigated to the “TB Notification reporting format for Pharmacy, Chemist & Druggist” page.
3. On this page the User will find list of applications with Name of Applicant, Name of Firm and Address is provided. Adjacent to each application there is an ‘Action Button’.
4. As the User clicks on the Action button an option is displayed – ‘Submit TB Report’.
5. The User clicks on ‘Submit TB Report’ and is navigated to the report page where Name of the Reporting (pharmacy), Telephone (with STD), Mobile Number, Complete Address, Year and Month is prefilled. The User selects ‘Whether Anti TB Drug has been sold for the month’.
6. If the User selects ‘no’ then nothing opens and the User clicks on Submit Report upon which a popup is displayed that the report is submitted successfully.
7. If the user selects ‘yes’ then a format is displayed where the User enters Name of TB Patient(surname first), Father's/Husband's name, Age(yrs), Sex(Male/Female/Transgender), GoI issued Identification number, Complete residential address, Patient District, PIN No, Patient Phone number, Date of Tb Diagnosis, Date of Tb treatment initiation, Date of prescription, Date of Dispensing Medicines, Number of Days for which Medicines dispensed, Name of treating medical Practitioner(Prescriber) and Address & Registration no. of treating medical practitioner. If the user wants to add more details he/she will click on the ‘Add Row’ option under action column and proceed. Once everything is filled the User will click on Submit Report upon which a popup is displayed that the report is submitted successfully.

18.3 Screenshot View

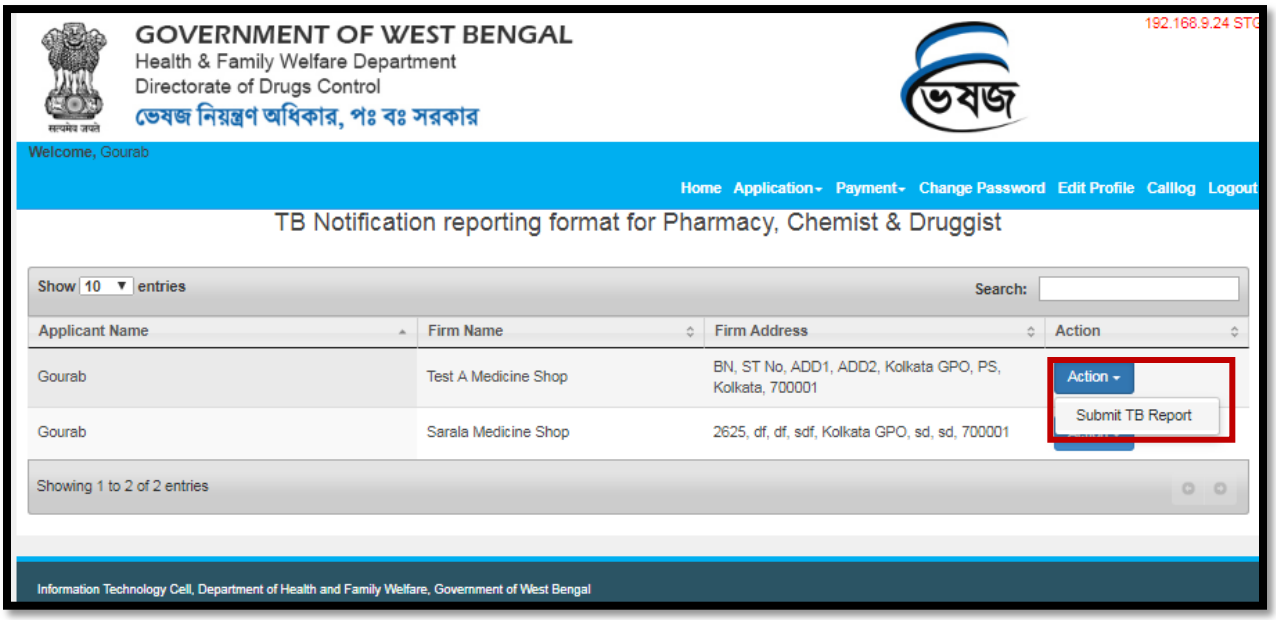
The User will login to the Drug license software (E-Vesoj). On the home page the User will find the link to “TB Notification Report”.



The User will click on the link and will be navigated to the “TB Notification reporting format for Pharmacy, Chemist & Druggist” page. On this page the User will find list of applications with Name of Applicant, Name of Firm and Address is provided. Adjacent to each application there is an ‘Action Button’.

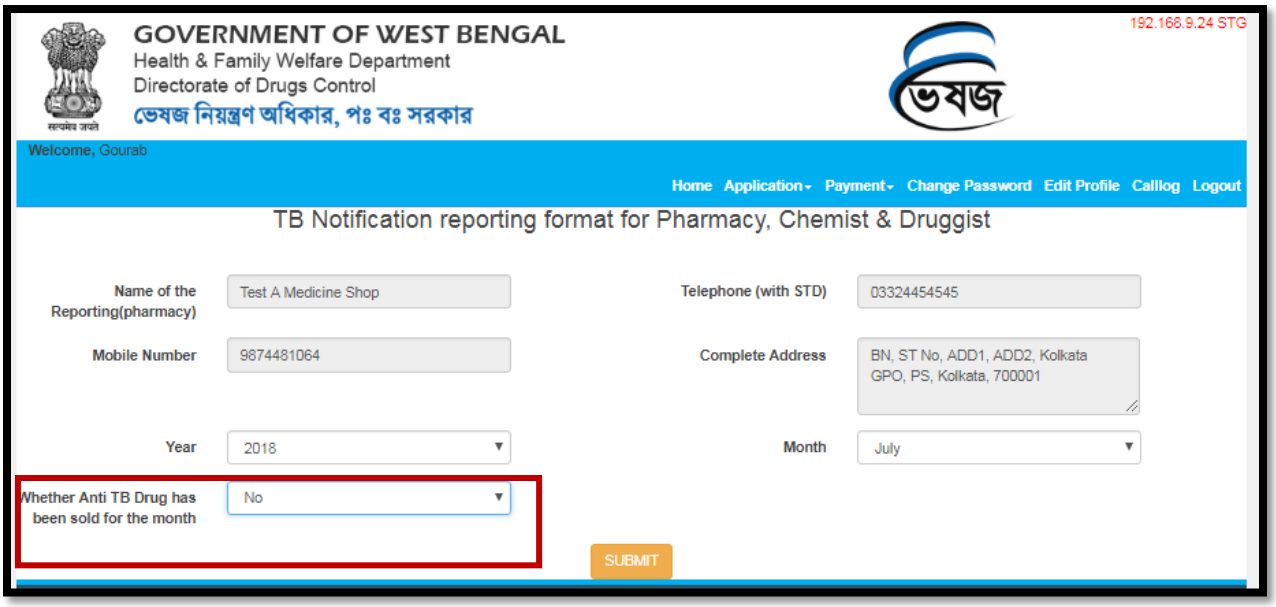


As the User clicks on the Action button an option is displayed – ‘Submit TB Report’.

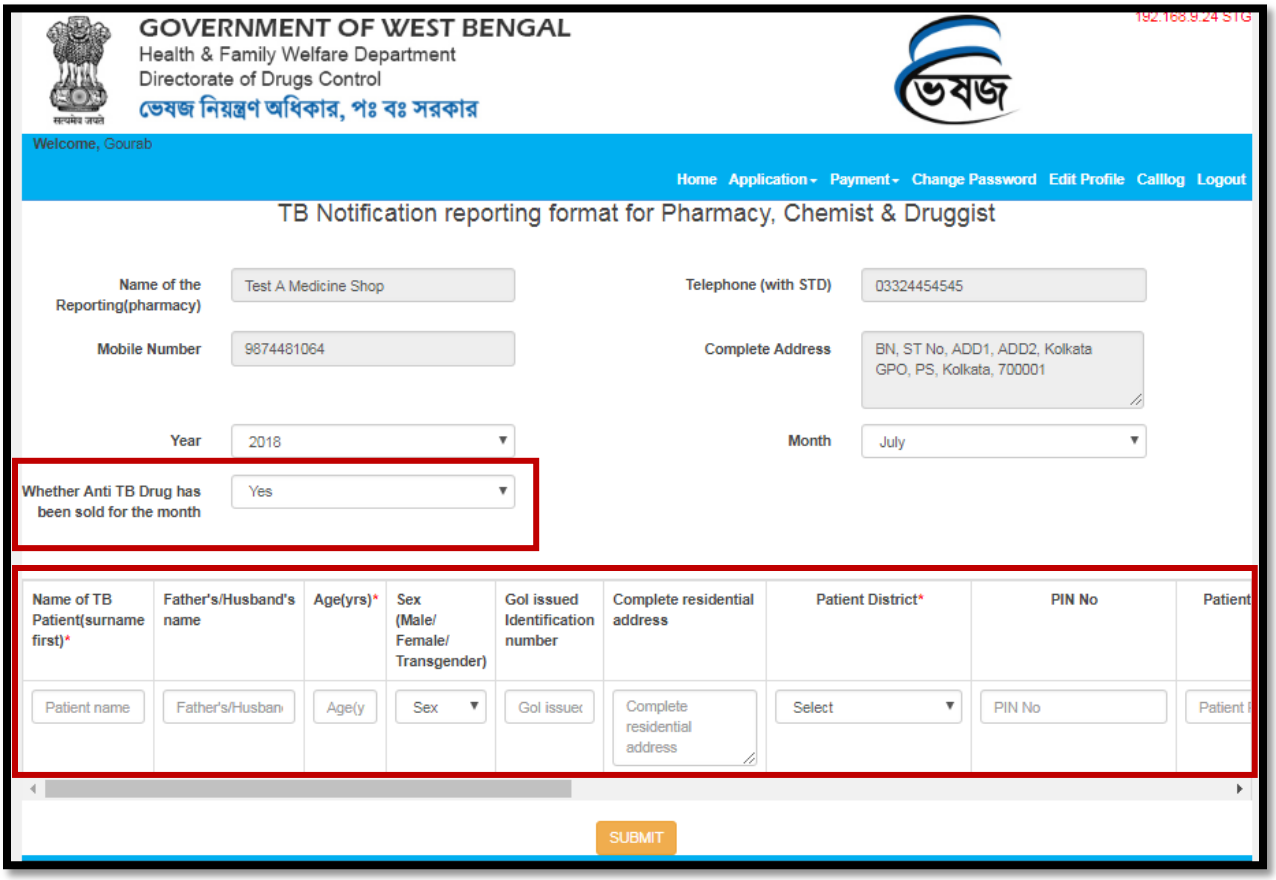


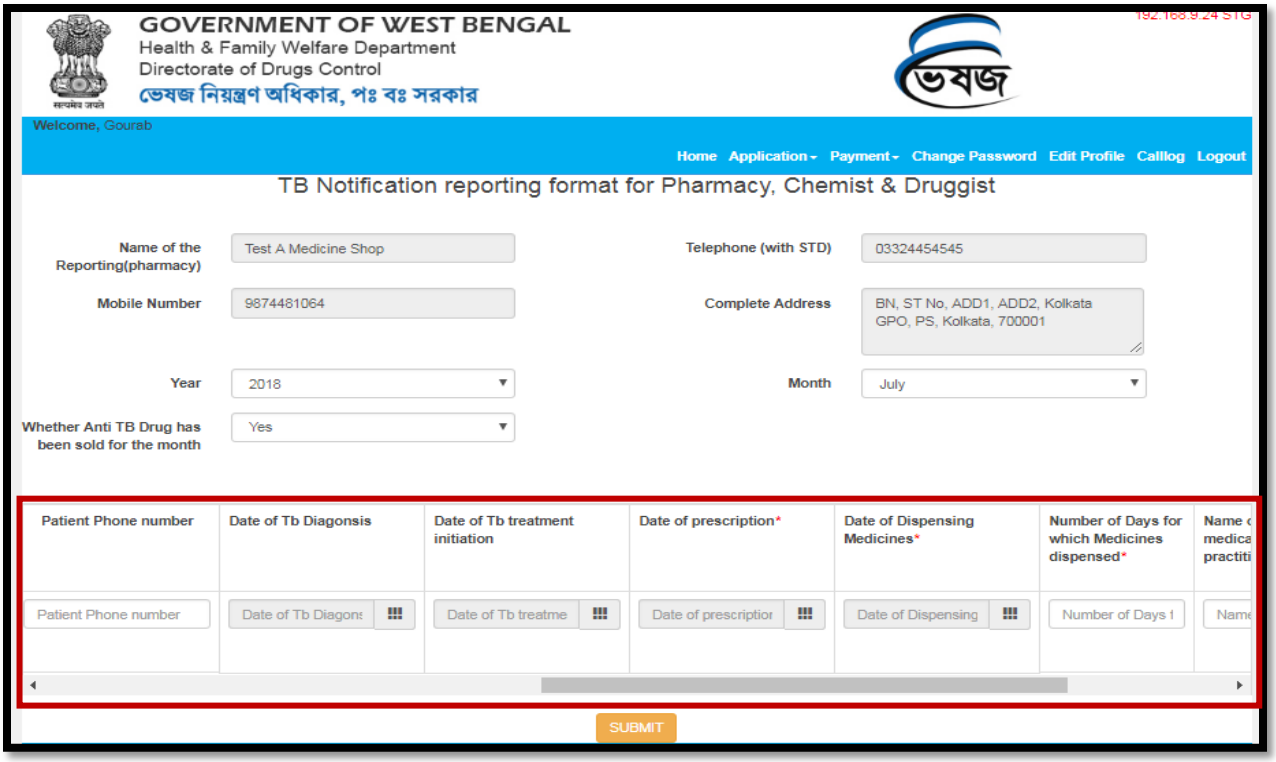
The User clicks on 'Submit TB Report' and is navigated to the report page where Name of the Reporting (pharmacy), Telephone (with STD), Mobile Number, Complete Address, Year and Month is prefilled. The User selects 'Whether Anti TB Drug has been sold for the month'.

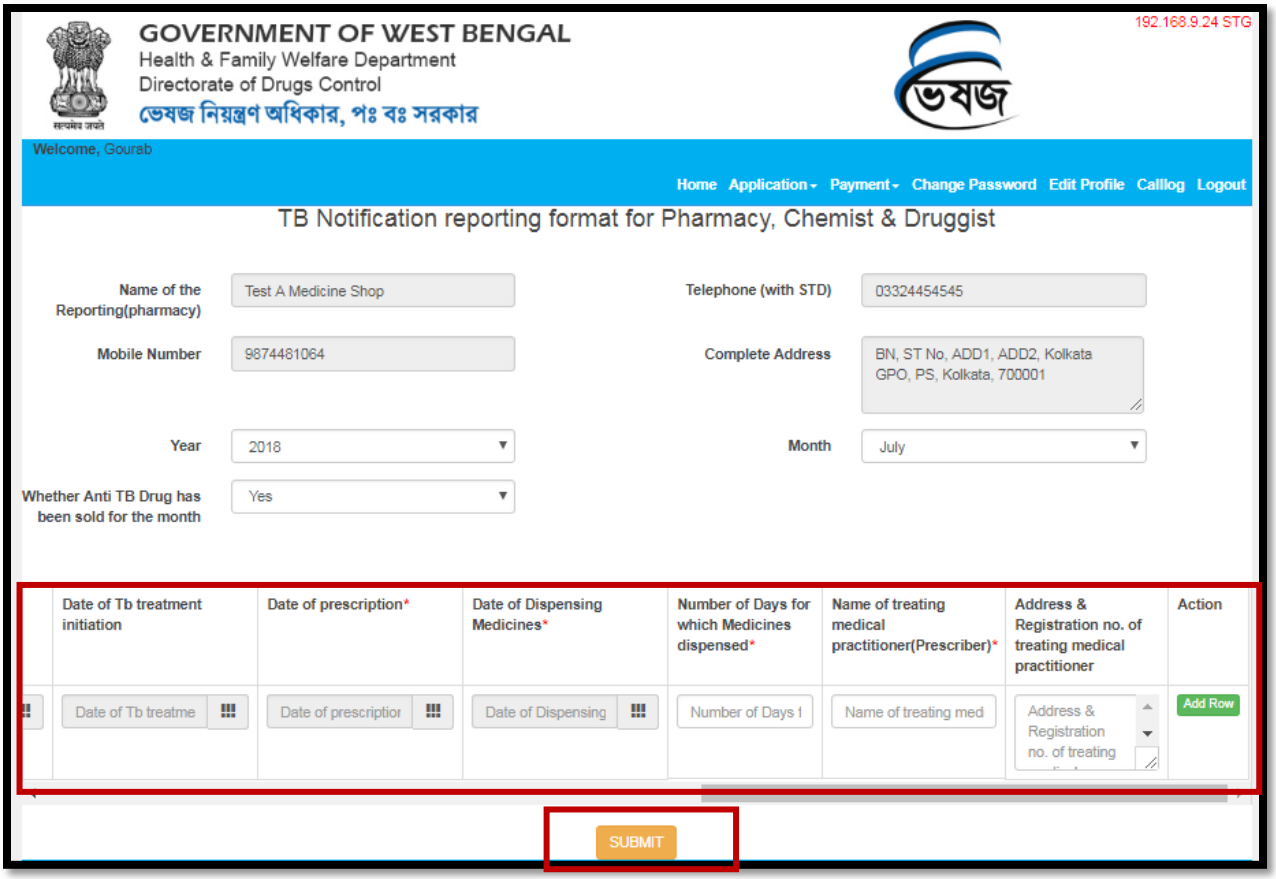
If the User selects 'no' then nothing opens and the User clicks on Submit Report upon which a popup is displayed that the report is submitted successfully.



If the user selects 'yes' then a format is displayed where the User enters Name of TB Patient(surname first), Father's/Husband's name, Age(yrs), Sex(Male/Female/Transgender), GoI issued Identification number, Complete residential address, Patient District, PIN No, Patient Phone number, Date of Tb Diagnosis, Date of Tb treatment initiation, Date of prescription, Date of Dispensing Medicines, Number of Days for which Medicines dispensed, Name of treating medical Practitioner(Prescriber) and Address & Registration no. of treating medical practitioner. If the user wants to add more details he/she will click on the 'Add Row' option under action column and proceed. Once everything is filled the User will click on Submit Report upon which a popup is displayed that the report is submitted successfully.




GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার
192.168.9.24 STG
Welcome, Gourab
Home Application Payment Change Password Edit Profile Calllog Logout
TB Notification reporting format for Pharmacy, Chemist & Druggist
Name of the Reporting(pharmacy)
Test A Medicine Shop
Telephone (with STD)
03324454545
Mobile Number
9874481064
Complete Address
BN, ST No, ADD1, ADD2, Kolkata GPO, PS, Kolkata, 700001
Year
2018
Month
July
Whether Anti TB Drug has been sold for the month
Yes
Patient Phone number
Date of Tb Diagonsis
Date of Tb treatment initiation
Date of prescription*
Date of Dispensing Medicines*
Number of Days for which Medicines dispensed*
SUBMIT

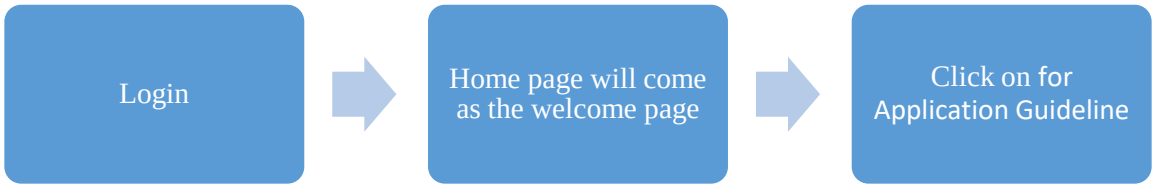

GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার
192.168.9.24 STG
Welcome, Gourab
Home Application Payment Change Password Edit Profile Calllog Logout
TB Notification reporting format for Pharmacy, Chemist & Druggist
Name of the Reporting(pharmacy)
Test A Medicine Shop
Telephone (with STD)
03324454545
Mobile Number
9874481064
Complete Address
BN, ST No, ADD1, ADD2, Kolkata GPO, PS, Kolkata, 700001
Year
2018
Month
July
Whether Anti TB Drug has been sold for the month
Yes
Date of Tb treatment initiation
Date of prescription*
Date of Dispensing Medicines*
Number of Days for which Medicines dispensed*
Name of treating medical practitioner(Prescriber)*
Address & Registration no. of treating medical practitioner
Action
Add Row
SUBMIT

125.22.76.14:8080 says
Report submitted successfully.
OK

19 Application Guideline

You will get this page after login. Here, you have Click Application Guideline and view the User manual.

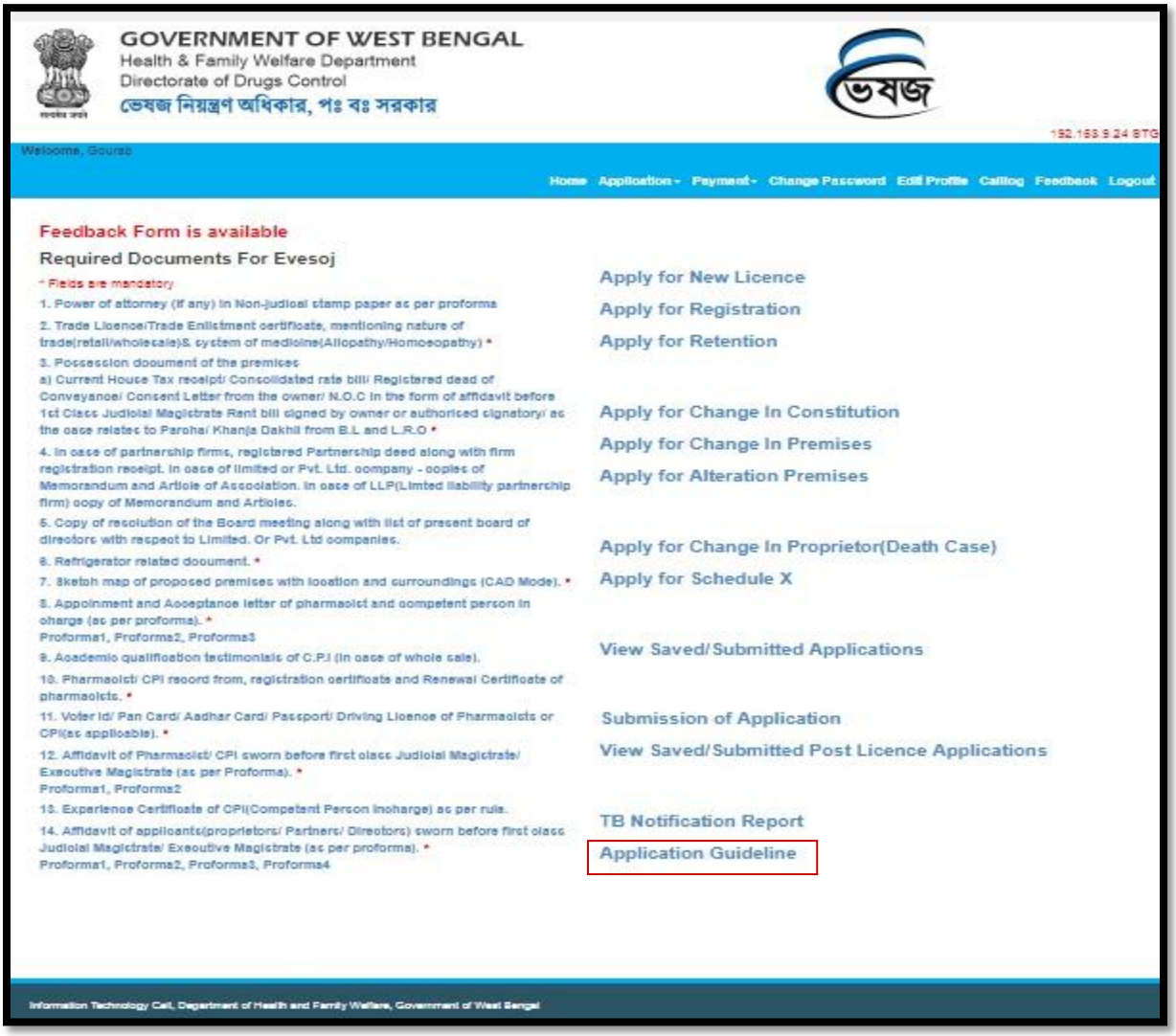
19.1 Process Flow



19.2 Detailed Steps

1. Login to the application
2. Home page will come as the welcome page.
3. Click on for Application Guideline.

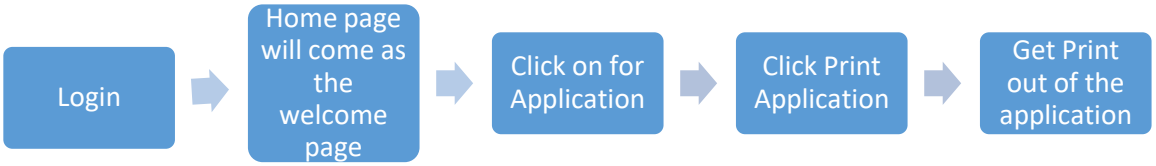
19.3 Screenshot view



20 Applications

You will get this page after login. Here, you have Click Application menu >> Print Application and view the Applications and details of applications and Form 19 also. Get print out of application.

20.1 Process Flow

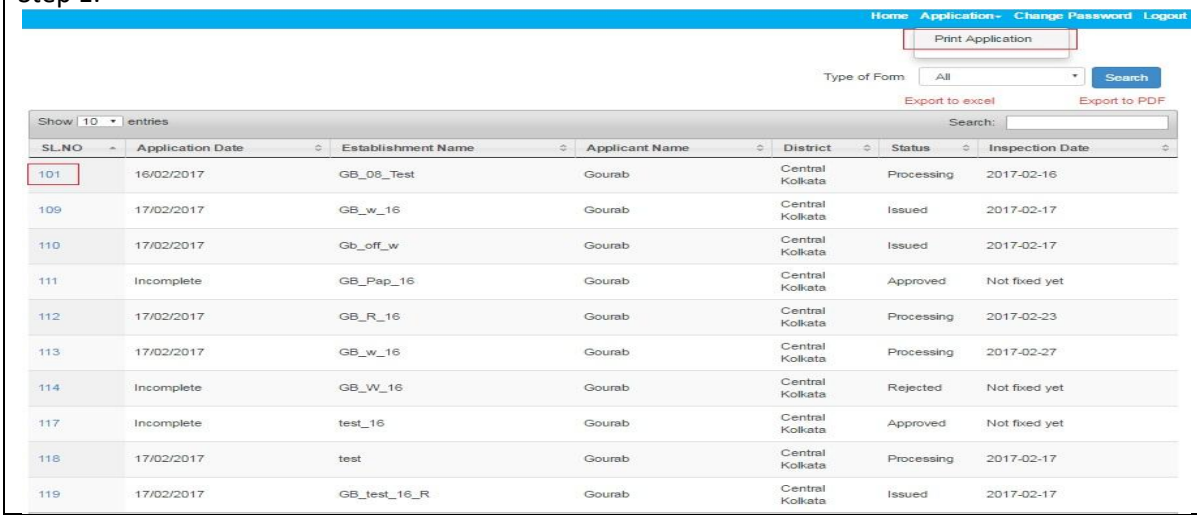


20.2 Detailed Steps

1. Login to the application
2. Home page will come as the welcome page.
3. Click on for Application menu >> Print Application.
4. Choose the application number
5. Print the application by clicking on hyperlinked form number.

20.3 Screenshot View

Step 1:



SL.NO	Application Date	Establishment Name	Applicant Name	District	Status	Inspection Date
101	16/02/2017	GB_08_Test	Gourab	Central Kolkata	Processing	2017-02-16
109	17/02/2017	GB_w_16	Gourab	Central Kolkata	Issued	2017-02-17
110	17/02/2017	Gb_off_w	Gourab	Central Kolkata	Issued	2017-02-17
111	Incomplete	GB_Pap_16	Gourab	Central Kolkata	Approved	Not fixed yet
112	17/02/2017	GB_R_16	Gourab	Central Kolkata	Processing	2017-02-23
113	17/02/2017	GB_w_16	Gourab	Central Kolkata	Processing	2017-02-27
114	Incomplete	GB_W_16	Gourab	Central Kolkata	Rejected	Not fixed yet
117	Incomplete	test_16	Gourab	Central Kolkata	Approved	Not fixed yet
118	17/02/2017	test	Gourab	Central Kolkata	Processing	2017-02-17
119	17/02/2017	GB_test_16_R	Gourab	Central Kolkata	Issued	2017-02-17

Step 2:

Home Application Change Password Logout

FORM NO. 19

[See Rule 59(2)]

Application for grant or renewal of a licence to sell, stock, exhibit or offer for sale, or distribute drugs other than those specified in Schedule X

1. I/We : Ratna, of GBP Medical Shop

hereby apply for licence to sale by wholesale/retail drugs specified in Schedule C and C(1) and excluding those Specified in Schedule X* and / or drugs other than those specified in Schedule C, C(1) and X to the Drugs and Cosmetics Rules, 1945* and also to operate a pharmacy on the premises situated at:**34, Roy Bahadur Road, Silpara, P.O.- Kolkata GPO, P.S.- Lalbazar, Kolkata, Central Kolkata, Pin- 700001**

2. The sale and dispensing of drugs will be made under the supervision of the registered pharmacist / competent person namely:-

Pharmacist Details

Name	Qualification	Other Qualification
Sam	B.Pharm	WER

3. Categories of drugs to be sold. **Biological_And_Non-Biological**

4. +Particulars for special storage accommodation.

5. A fee of Rs. : 0.00 has been credited to Government under the head of Account 0210-Medical & Public Health & Allopathy Drugs Manufacture Receipts under Drugs Act-State (Vide treasury receipts attached)

Date: **Incomplete**

* Delete whichever is not applicable.

To be deleted if drugs will be sold only by wholesale.

\+ Required only if products requiring special storage are to be sold.

Additional Information Form for Grant of Licences to Sell Drugs

(See Rule 65A of the Drugs and Cosmetics Rules)

to be enclosed with application in Form 19,19A, 19B and/or to be furnished for

Licences in Form No. 20,21,20A,20B,20C,20F and 20G

1.Location and Direction (Rly. Station). Bus Route and the Stoppage nearest and brief directory:

2.Actual floor space area: 109

3. Height from floor to ceiling: 10

4. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling): as

5. How the premises is legally possessed and to be used for the licences? What are the copies 'of documents furnished? (Rent Receipt of owned tax receipt etc. copies to be enclosed): Owned by owner

6. If copy Trade Licenses I Tax Receipt from the Local Govt./Panchayet has been enclosed: Yes

7. Constitution of the firm and attested/xerox copy of document in support thereof is to be furnish Partnership

8. Qualification of the person responsible for operation if granted: as

9. Whether other business including that in Drugs is being carried out by the present/applicant?: Yes

10. Is the application for grant or renewal in case of renewal, please note the D. L. No.(s):

11. Changing Constitution:

12. Changing Premises:

13. Alteration Of Premises:

14. Schedule X:

15. Whether any other application has been rejected or convicted under D & A Act? Yes

16. Is it for an application due to change in constitutIOn of a Licensed Firm? If so, please note the date of such change and manner.:

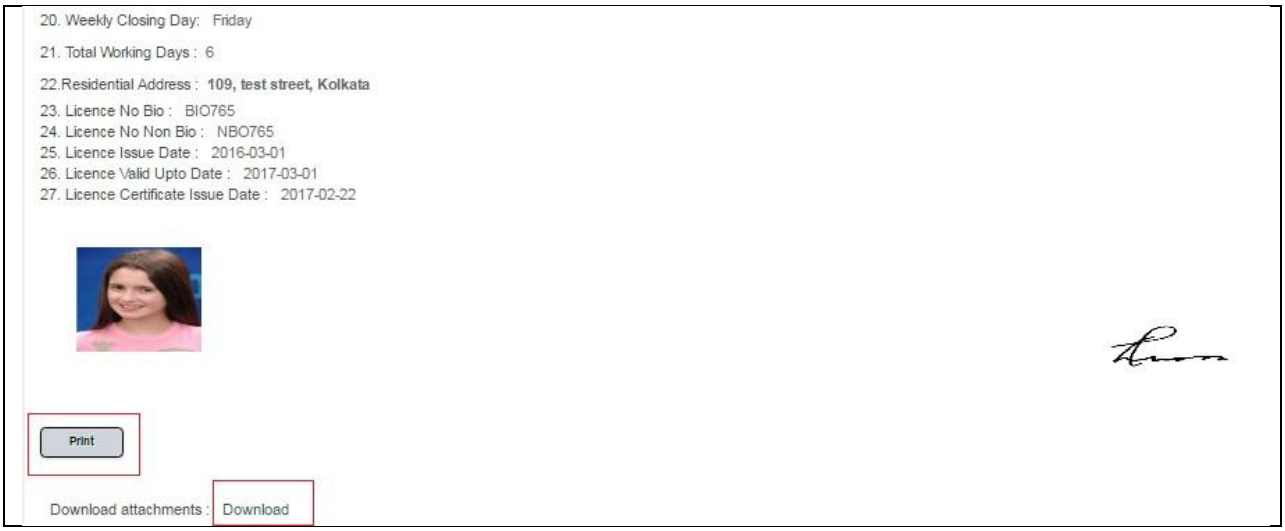
16(a). Date:

16(b). Manner of Change:

17. Whether the Competent! Person-In-Charge ever convicted under the mentioned Drugs and Cosmetics Act, 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?:

18. Whether Refrigerator has been installed to stock for sale Drugs requiring Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished?:

19. Working Hour: 14

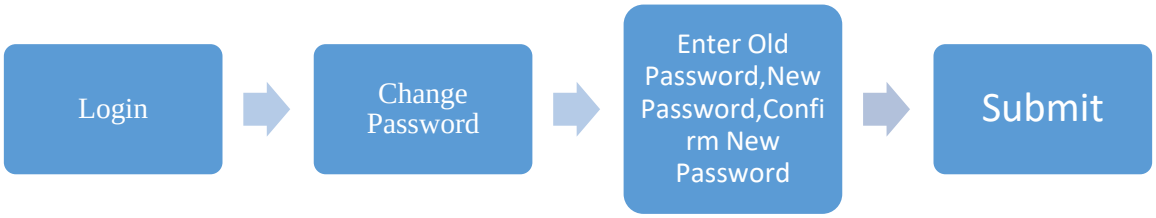


User can take the print out of the form by clicking on the button “Print” and also user can check all the uploaded document by clicking on” Download” link. As shown in the above screenshot.

21 Change Password

You will get this page after login. Here, you have Click Change password and submit for change password.

21.1 Process Flow



21.2 Detailed Steps

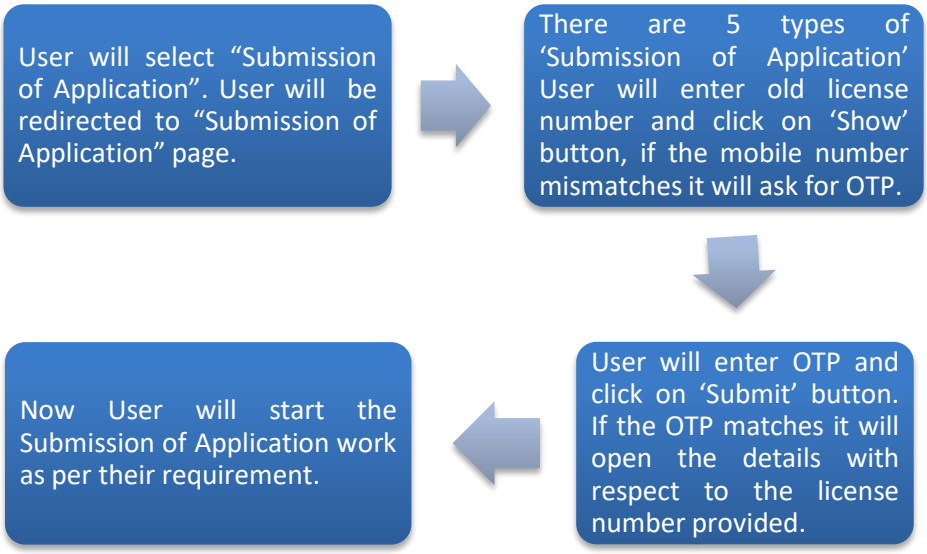
1. Login to the application
2. Click change Password.
3. Click enter Old Password, New Password, Confirm New Password
4. Click on Submit.

21.3 Screenshot View

22 Submission of Application

User will select “Submission of Application”. User will redirect to “Submission of Application” page. There are 5 types of ‘Submission of Application’ which are mentioned in the below screenshot. User will enter old license number and click on ‘Show’ button, if the mobile number mismatches it will ask for OTP. User will enter OTP and click on ‘Submit’ button. If the OTP matches it will open the details with respect to the license number provided. Now User will start the Submission of Application work as per their requirement.

22.1 Process Flow

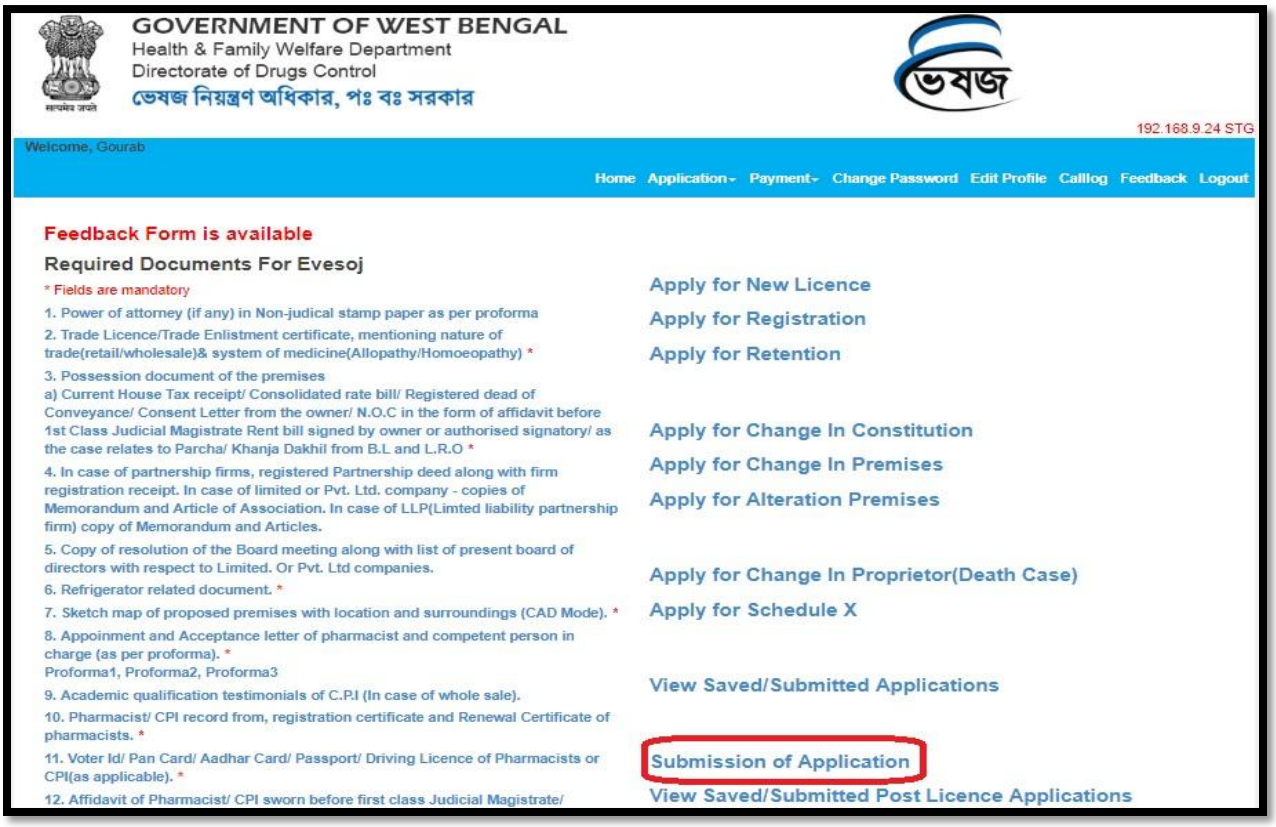


22.2 Detailed Steps

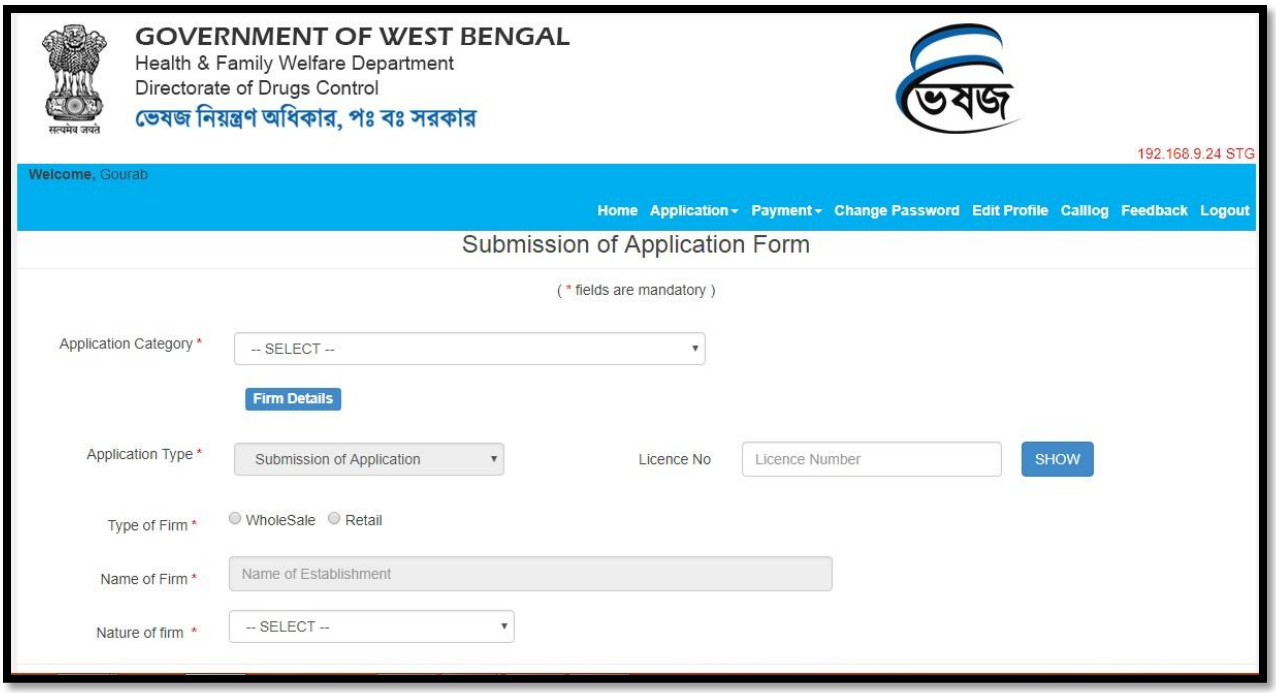
- User will select “Submission of Application”. User will be redirected to “Submission of Application” page.
- There are 5 types of ‘Submission of Application’ User will enter old license number and click on ‘Show’ button, if the mobile number mismatches it will ask for OTP.
- User will enter OTP and click on ‘Submit’ button. If the OTP matches it will open the details with respect to the license number provided.
- Now User will start the Submission of Application work as per their requirement.

22.3 Screenshot View

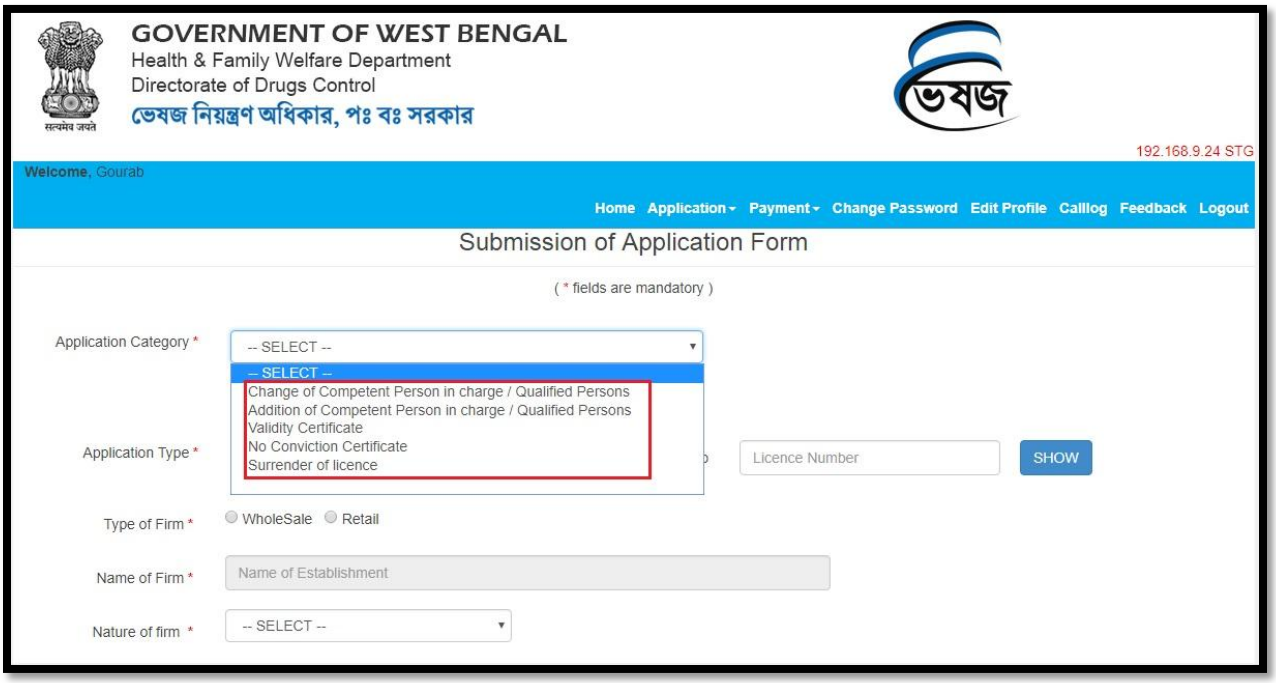
User will select “Submission of Application”.



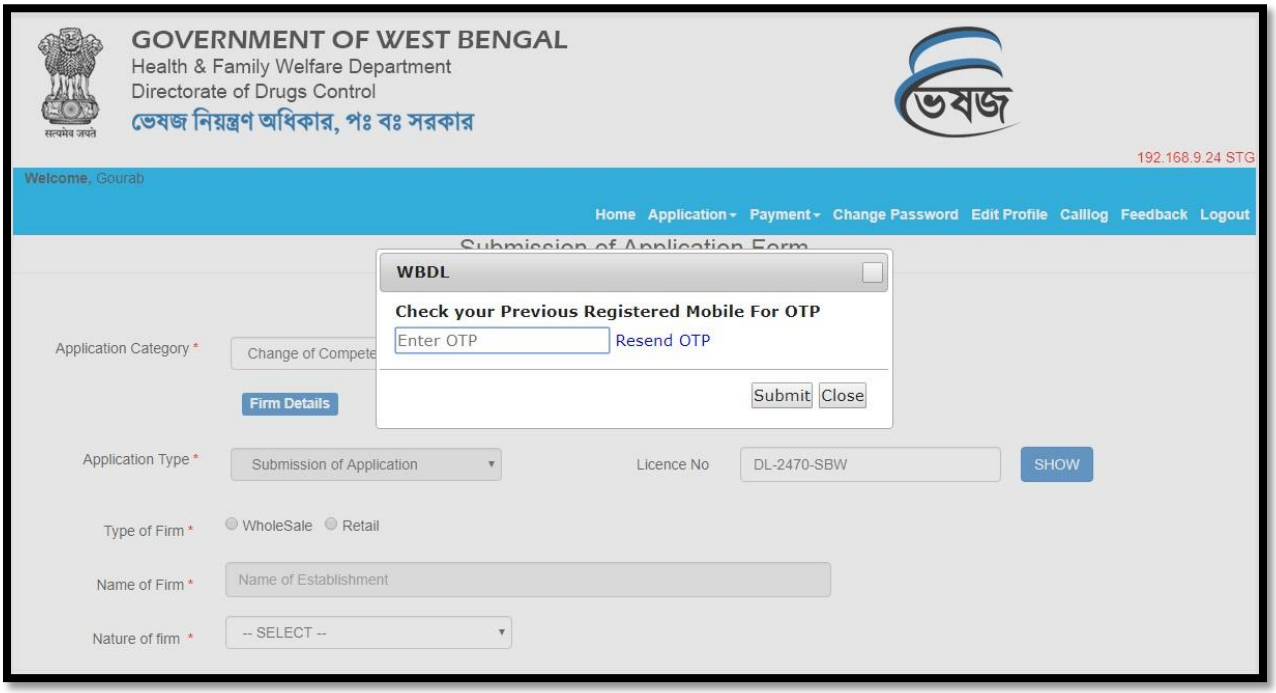
User will redirect to “Submission of Application” page.



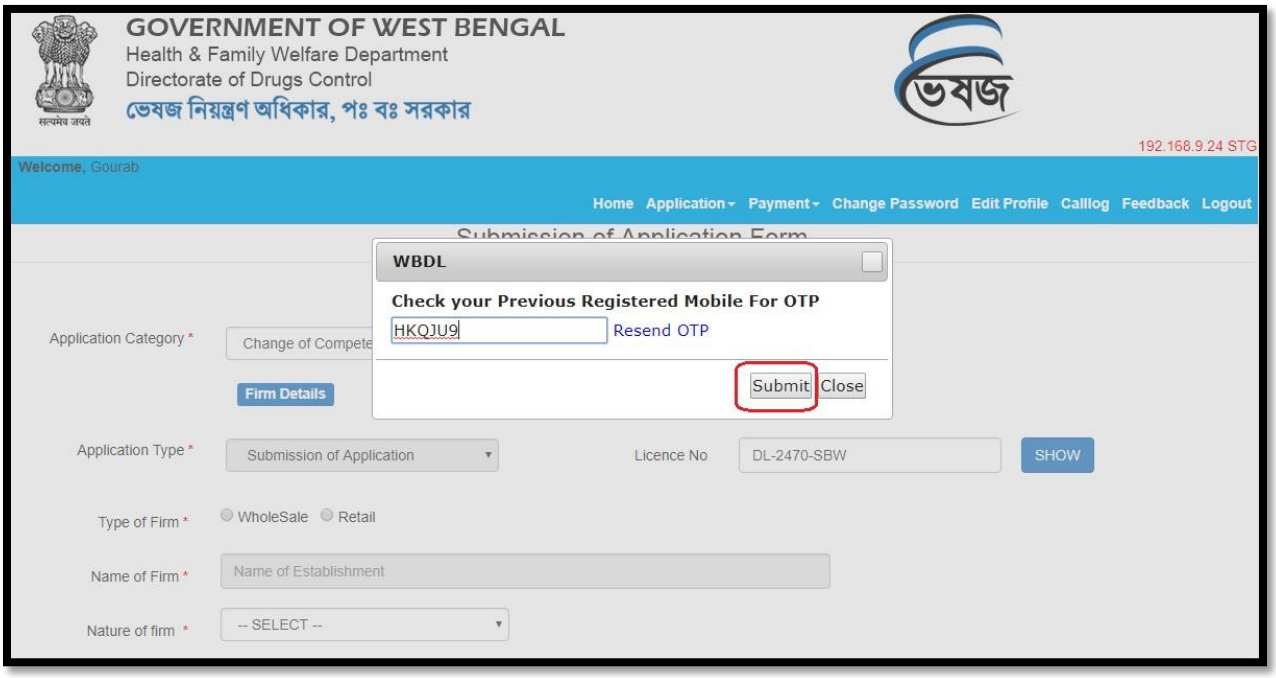
There are 5 types of ‘Submission of Application’ which are mentioned in the below screenshot.



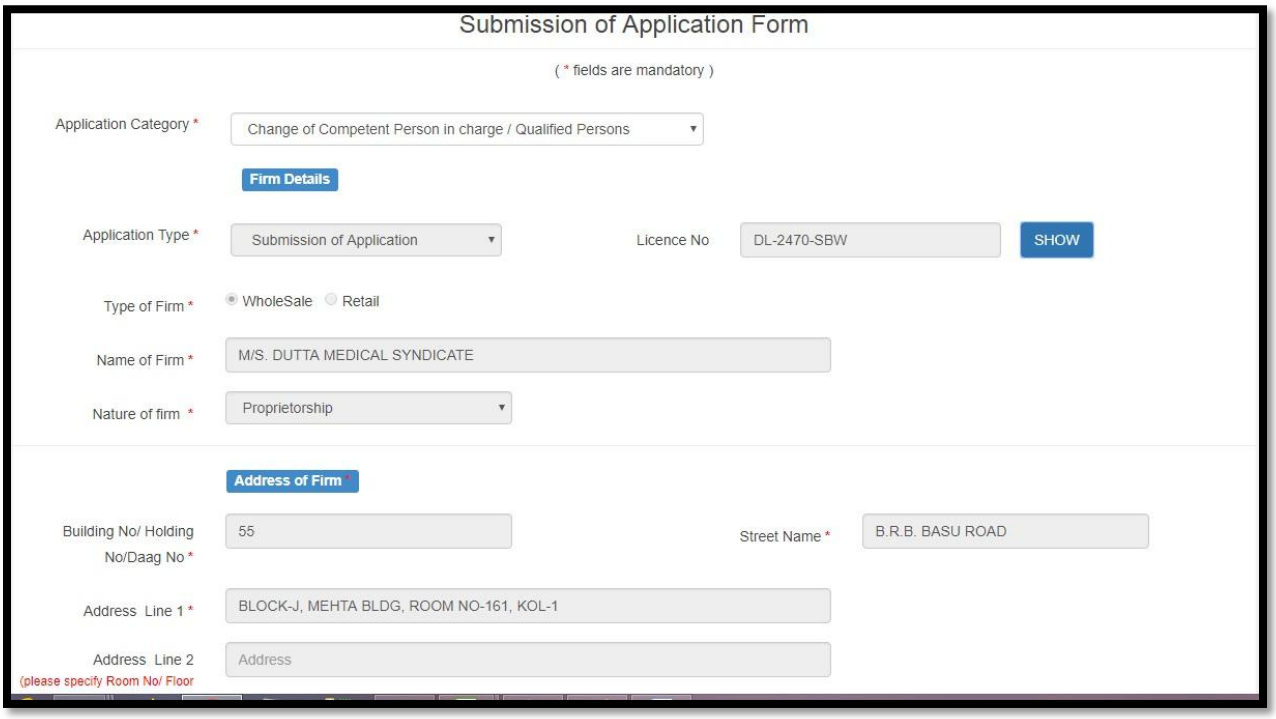
User will enter old license number and click on ‘Show’ button, if the mobile number mismatches it will ask for OTP.



User will enter OTP and click on 'Submit' button.



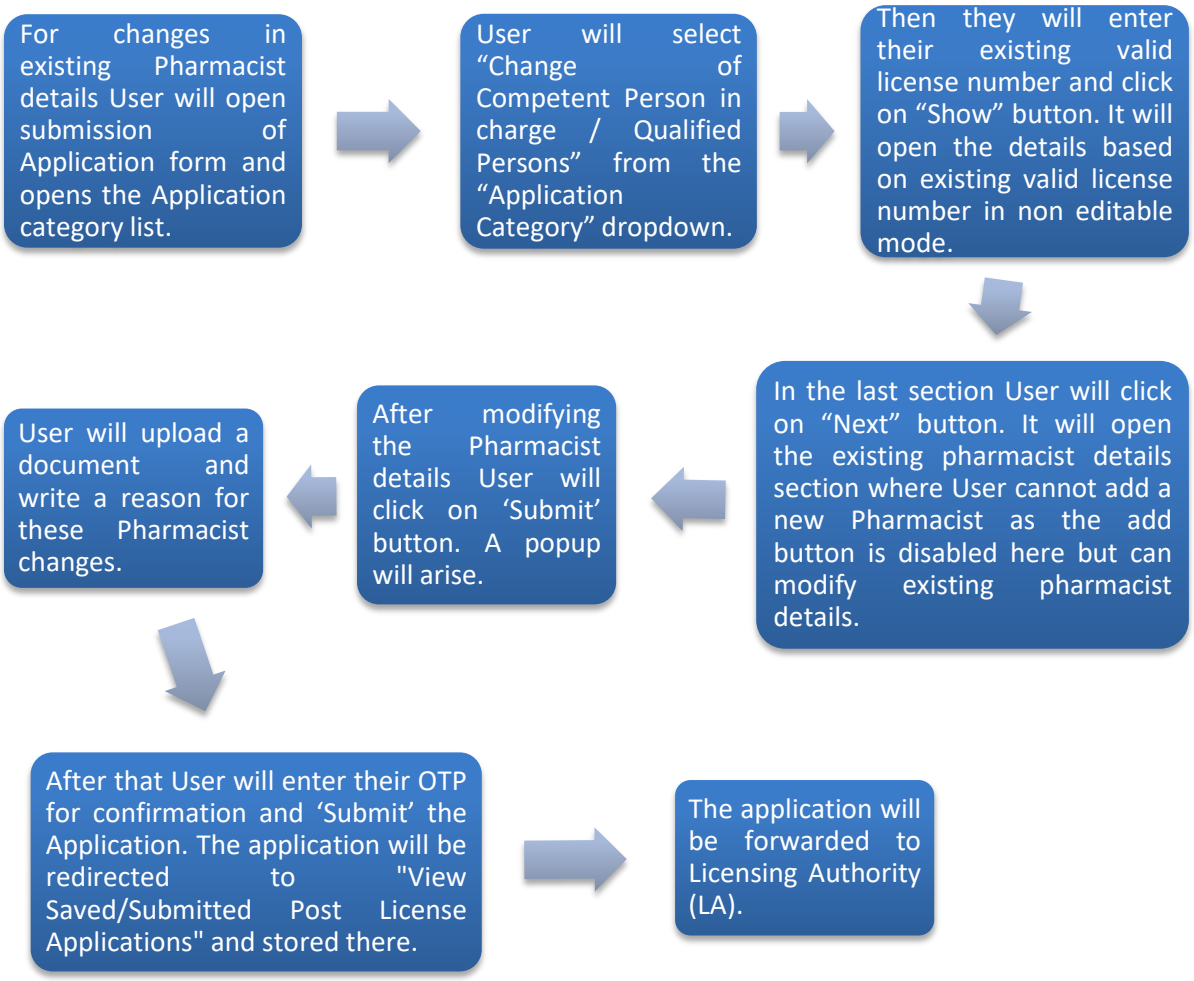
If the OTP matches it will open the details with respect to the license number provided. Now User will start the Submission of Application work as per their requirement.



23 Change of Competent Person in charge / Qualified Persons (Editing Pharmacist)

For changes in existing Pharmacist details User will open submission of Application form and opens the Application category list. User will select “Change of Competent Person in charge / Qualified Persons” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button. It will open the details based on existing valid license number in non editable mode. In the last section User will click on “Next” button. It will open the existing pharmacist details section where User cannot add a new Pharmacist as the add button is disable here but can modify existing pharmacist details. After modifying the Pharmacist details User will click on ‘Submit’ button. A popup will arise as shown below. User will upload a document and write a reason for these Pharmacist changes. After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).

23.1 Process Flow

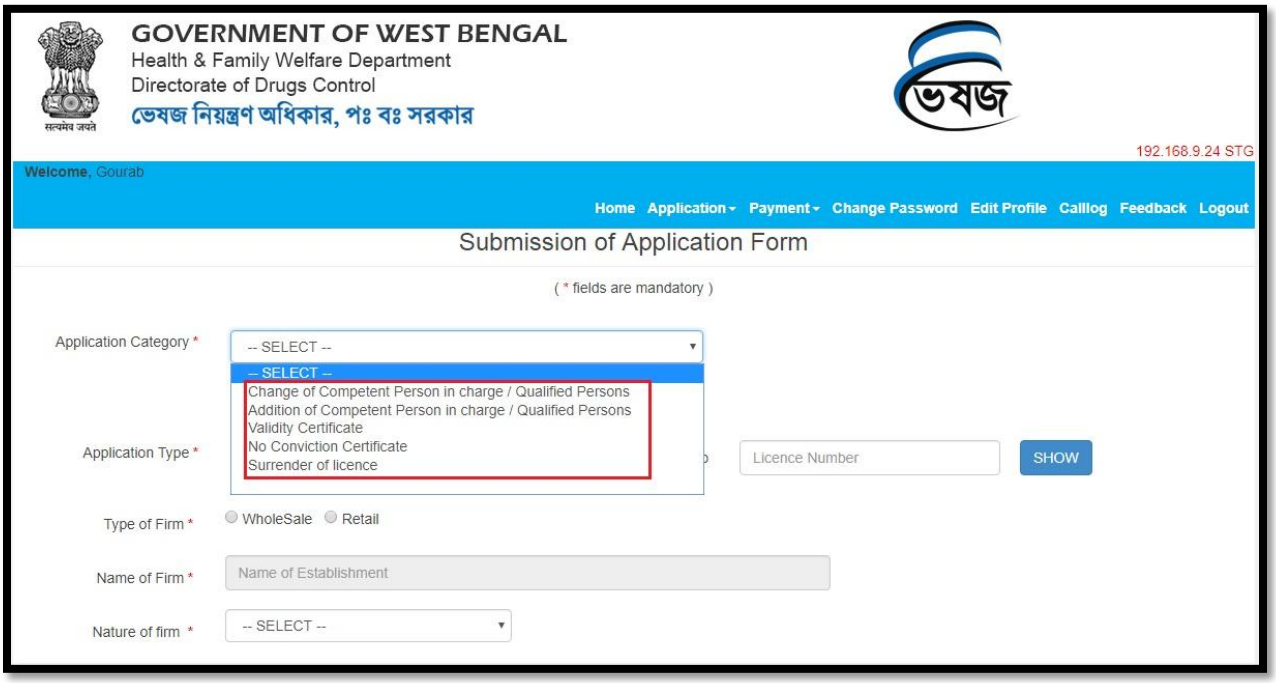


23.2 Detailed Steps

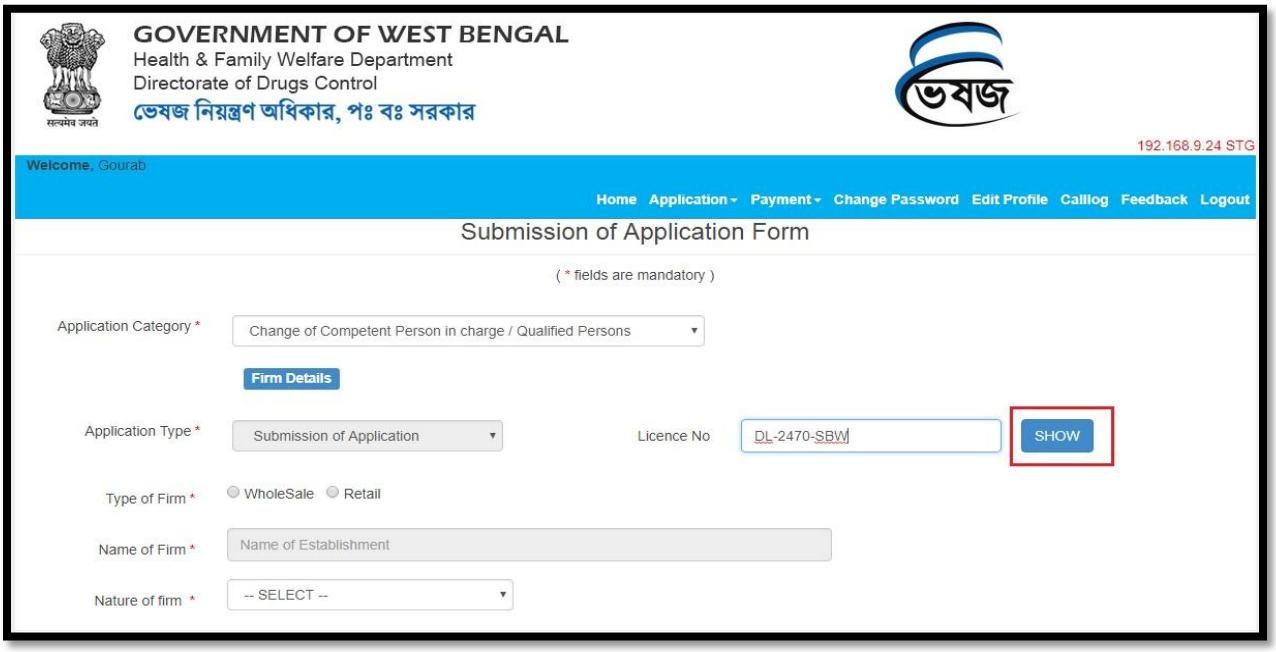
- For changes in existing Pharmacist details User will open submission of Application form and opens the Application category list.
- User will select “Change of Competent Person in charge / Qualified Persons” from the “Application Category” dropdown.
- Then they will enter their existing valid license number and click on “Show” button. It will open the details based on existing valid license number in non editable mode.
- In the last section User will click on “Next” button. It will open the existing pharmacist details section where User cannot add a new Pharmacist as the add button is disabled here but can modify existing pharmacist details.
- After modifying the Pharmacist details User will click on ‘Submit’ button. A popup will arise.
- User will upload a document and write a reason for these Pharmacist changes.
- After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will be redirected to "View Saved/Submitted Post License Applications" and stored there.
- The application will be forwarded to Licensing Authority (LA).

23.3 Screenshot View

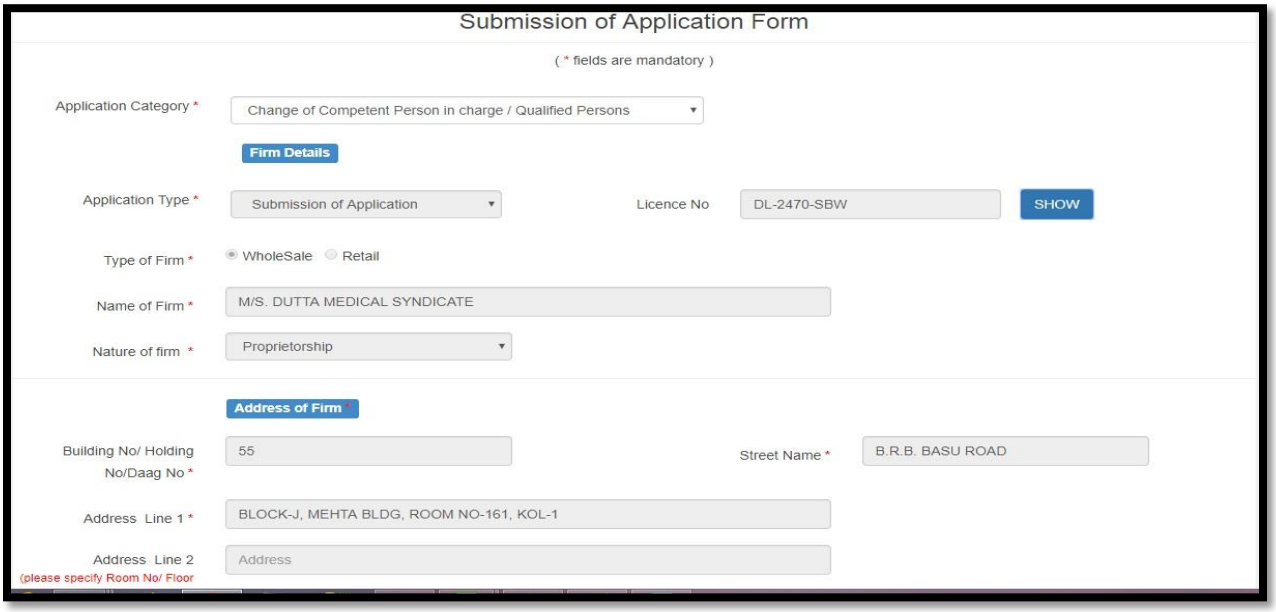
For changes in existing Pharmacist details User will open submission of Application form and opens the Application category list.



User will select “Change of Competent Person in charge / Qualified Persons” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button.



It will open the details based on existing valid license number in non editable mode.



No if availble)

District * Central Kolkata

Post Office For Kolkata Kolkata GPO

Police Station HARE STREET

City/Village * KOLKATA

Pin Code * 700001

Local Authority * KMA

Contact Details of establishment

Email ID * hdutta2009@yahoo.co.in

Landline Landline
(ex:033-xxxx-xxxx)

Mobile * 9874481064
(Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted B. COM

Modification of Credentials* Not Applicable

Service Details

Categories of drugs to be sold * Bio And Non Bio

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises Yes No

Actual floor space area* (Min 108 sq.ft) 170 sqft.

Height from floor to ceiling 10 ft.

Trade Licence Applied for Licence Available

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built, Plastered and Floor Cemented Roofing and Ceiling). * BRICK BUILD, PLASTERED WALL

2. Nature of Ceiling * RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

In the last section User will click on “Next” button

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Rented

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requiring Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 8

11. Weekly Closing Day THURSDAY
(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

Next

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

It will open the existing pharmacist details section where User cannot add a new Pharmacist as the add button is disable here but can modify existing pharmacist details.

mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? *

10. Working Hour: 8

11. Weekly Closing Day: THURSDAY (Please provide any day of the week, like Sunday,Monday.....)

12. Total Working days (in a week): 6

Registered Pharmacist Details

Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joining L
RABINDRA Choudhury	Others	B. COM	76	20	NA	Yes / No	Yes / No

Submit

Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

Registered Pharmacist Details

ars) * dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joining Letter *	Educational Certificate *	Experience Certificate *	Registration Certificate *	Action
	NA	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Add Row / Remove Row

Submit

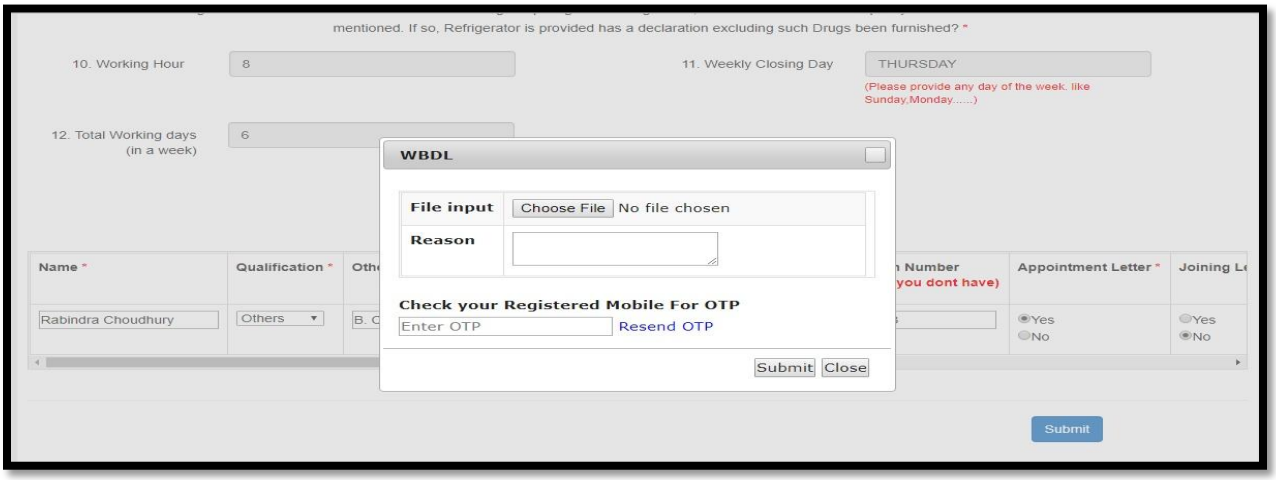
After modifying the Pharmacist details User will click on 'Submit' button.

Registered Pharmacist Details

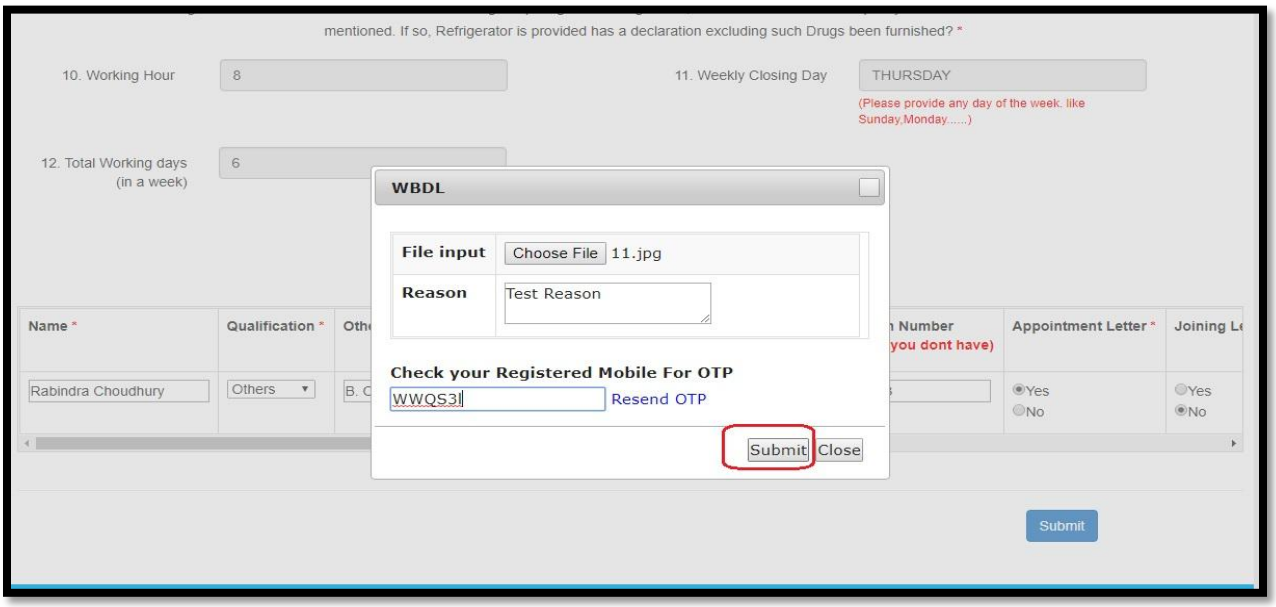
Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joining L
Rabindra Choudhury	Others	B. COM	76	21	1313131313	Yes / No	Yes / No

Submit

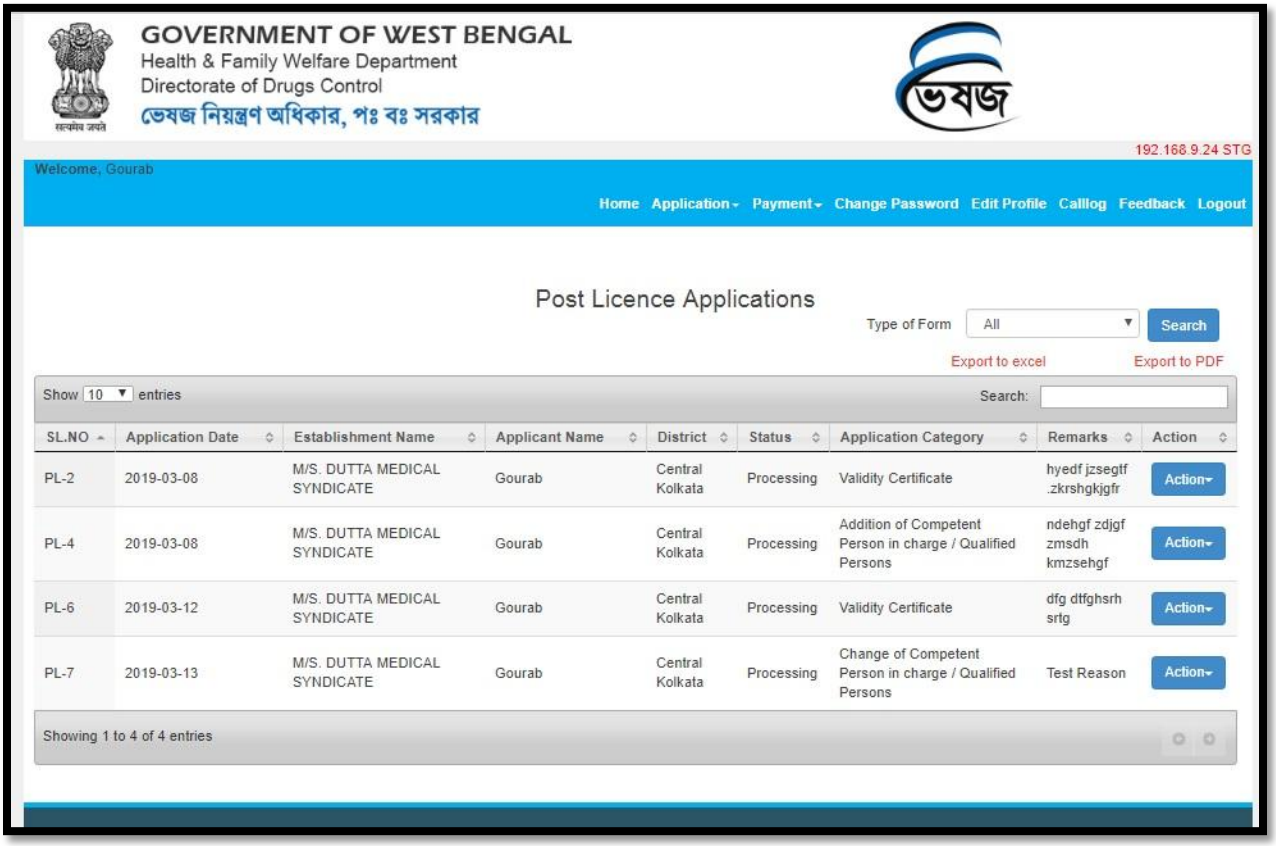
A popup will arise as shown below



User will upload a document and write a reason for these Pharmacist changes. After that User will enter their OTP for confirmation and 'Submit' the Application.



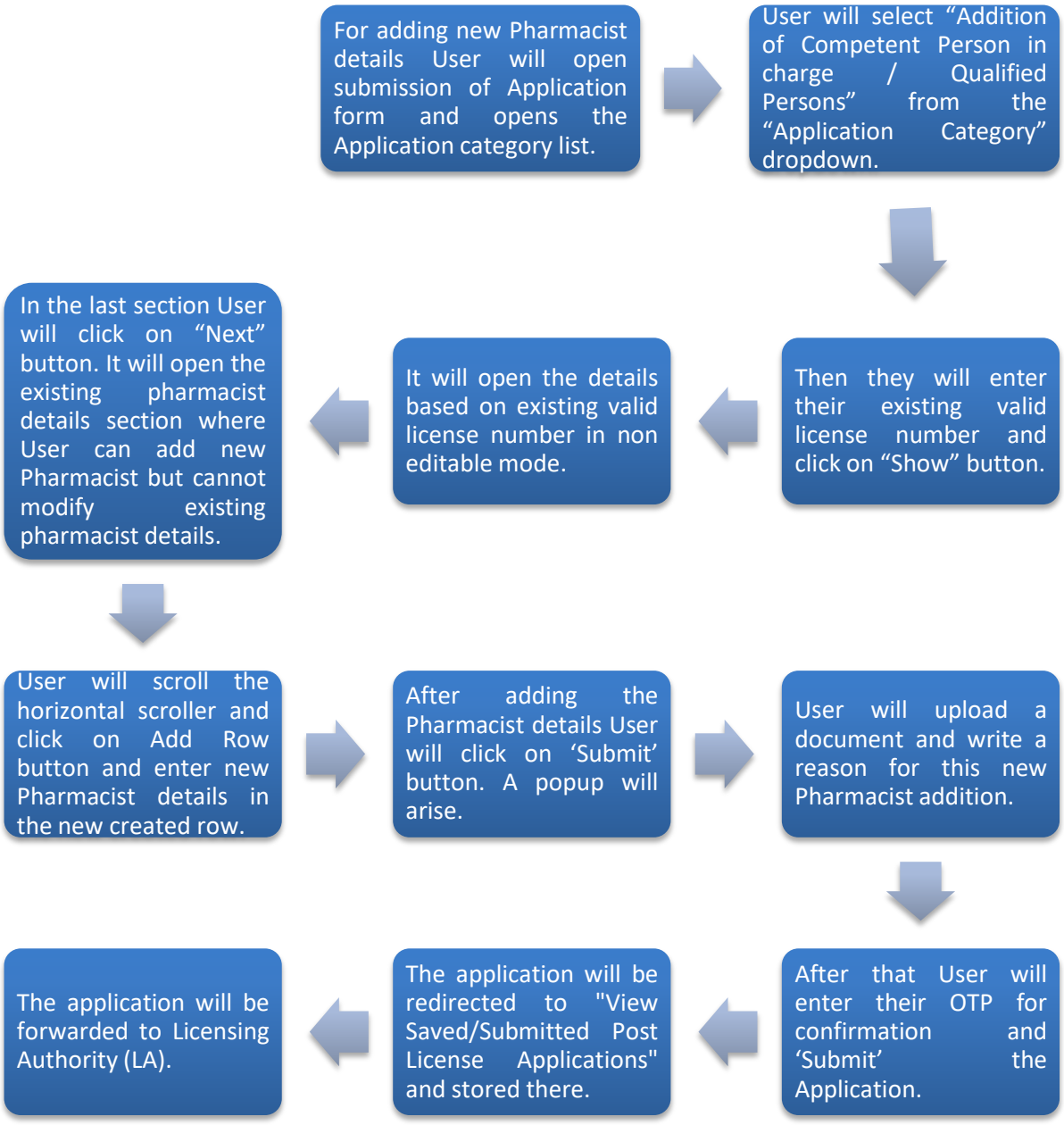
The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).



24 Addition of Competent Person in charge / Qualified Persons (Adding Pharmacist)

For adding new Pharmacist details User will open submission of Application form and opens the Application category list. User will select “Addition of Competent Person in charge / Qualified Persons” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button. It will open the details based on existing valid license number in non editable mode. In the last section User will click on “Next” button. It will open the existing pharmacist details section where User can add new Pharmacist but cannot modify existing pharmacist details. User will scroll the horizontal scroller and click on Add Row button. User will enter new Pharmacist details in the new created row. After adding the Pharmacist details User will click on ‘Submit’ button. A popup will arise as shown below. User will upload a document and write a reason for this new Pharmacist addition. After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).

24.1 Process Flow

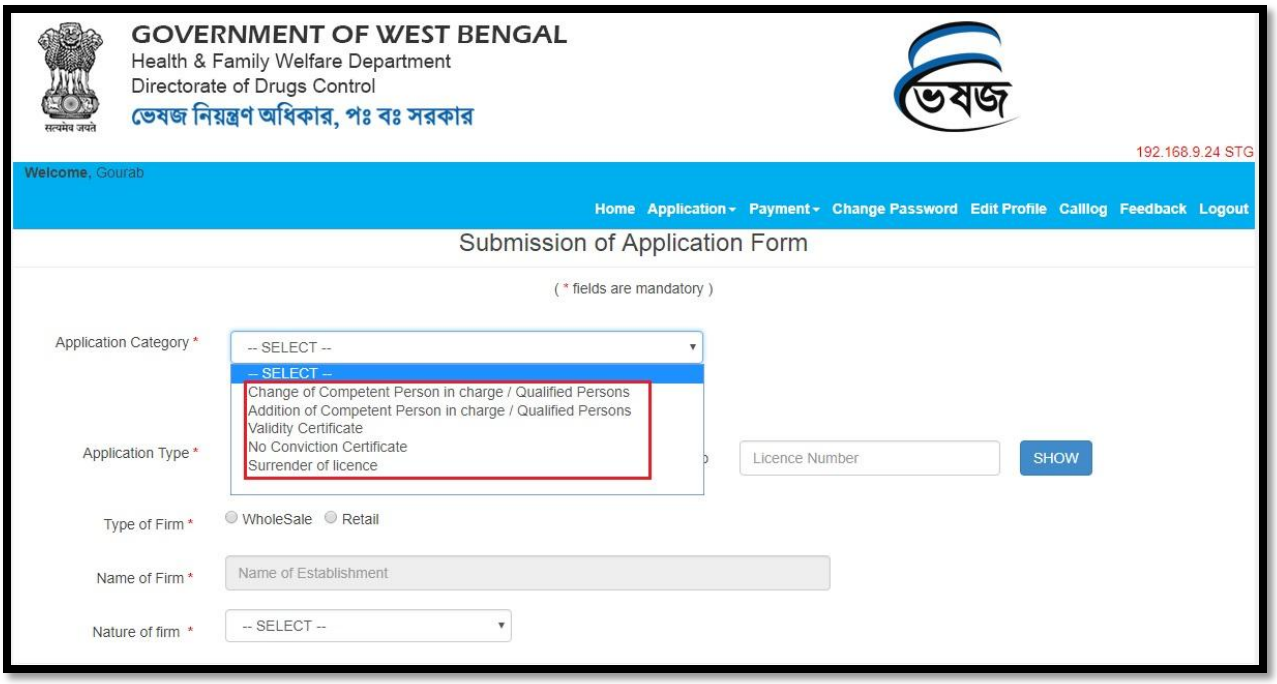


24.2 Detailed Steps

- For adding new Pharmacist details User will open submission of Application form and opens the Application category list.
- User will select “Addition of Competent Person in charge / Qualified Persons” from the “Application Category” dropdown.
- Then they will enter their existing valid license number and click on “Show” button.
- It will open the details based on existing valid license number in non editable mode.
- In the last section User will click on “Next” button. It will open the existing pharmacist details section where User can add new Pharmacist but cannot modify existing pharmacist details.
- User will scroll the horizontal scroller and click on Add Row button and enter new Pharmacist details in the new created row.
- After adding the Pharmacist details User will click on ‘Submit’ button. A popup will arise.
- User will upload a document and write a reason for this new Pharmacist addition.
- After that User will enter their OTP for confirmation and ‘Submit’ the Application.
- The application will be redirected to "View Saved/Submitted Post License Applications" and stored there.
- The application will be forwarded to Licensing Authority (LA).

24.3 Screenshot View

For adding new Pharmacist details User will open submission of Application form and opens the Application category list.



User will select “Addition of Competent Person in charge / Qualified Persons” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button.

It will open the details based on existing valid license number in non editable mode.

Submission of Application Form

(* fields are mandatory)

Application Category * : Addition of Competent Person in charge / Qualified Persons

Firm Details

Application Type * : Submission of Application

Licence No : DL-2470-SBW SHOW

Type of Firm * : WholeSale Retail

Name of Firm * : M/S. DUTTA MEDICAL SYNDICATE

Nature of firm * : Proprietorship

Address of Firm *

Building No/ Holding No/Daag No * : 55

Street Name * : B.R.B. BASU ROAD

Address Line 1 * : BLOCK-J, MEHTA BLDG, ROOM NO-161, KOL-1

Address Line 2 (please specify Room No/ Floor No if availble) : Address

District * : Central Kolkata

Post Office For Kolkata : Kolkata GPO

Police Station : HARE STREET

City/Village * : KOLKATA

Pin Code * : 700001

Local Authority * : KMA

Contact Details of establishment

Email ID * : hdutta2009@yahoo.co.in

Landline : Landline (ex:033-xxxx-xxxx)

Mobile * : 9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted : B. COM

Modification of Credentials* : Not Applicable

Service Details

Categories of drugs to be sold * : Bio And Non Bio

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises : Yes No

Actual floor space area* (Min 108 sq.ft) : 170 sqft.

Height from floor to ceiling : 10 ft.

Trade Licence : Applied for Licence Available

In the last section User will click on “Next” button

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * BRICK BUILD, PLASTERED WALL

2. Nature of Ceiling * RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Rented

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 8

11. Weekly Closing Day THURSDAY

(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

Next

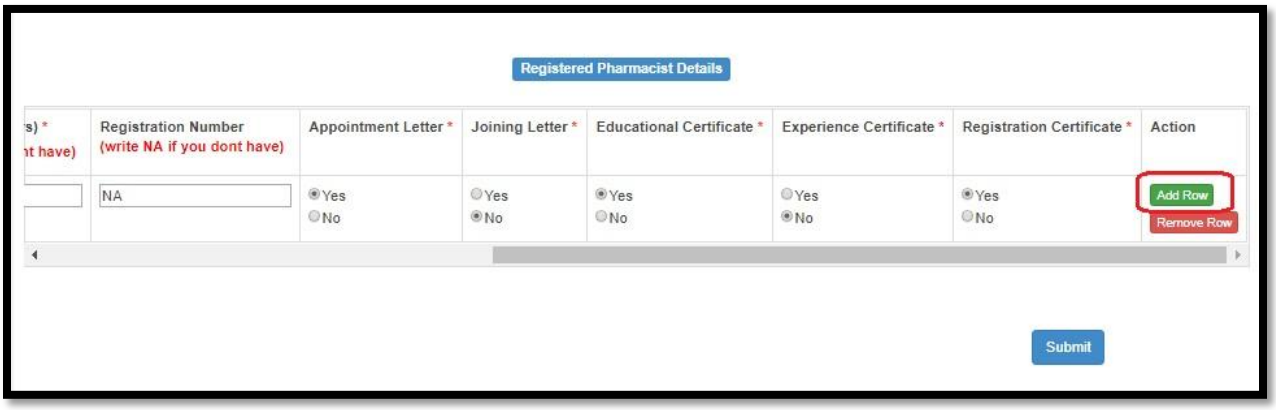
It will open the existing pharmacist details section where User can add new Pharmacist but cannot modify existing pharmacist details.

Registered Pharmacist Details

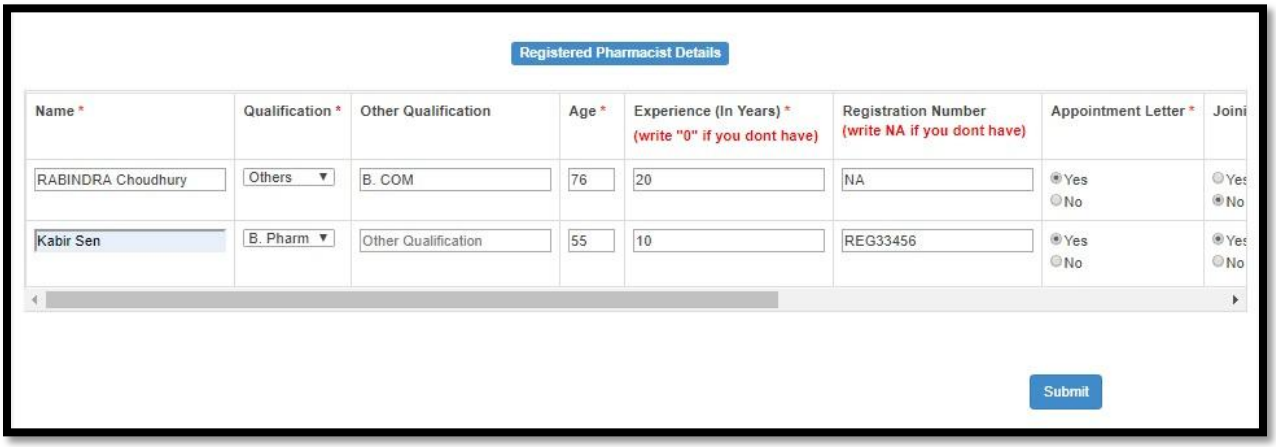
Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joini
RABINDRA Choudhury	Others	B. COM	76	20	NA	Yes No	Yes No

Submit

User will scroll the horizontal scroller and click on Add Row button

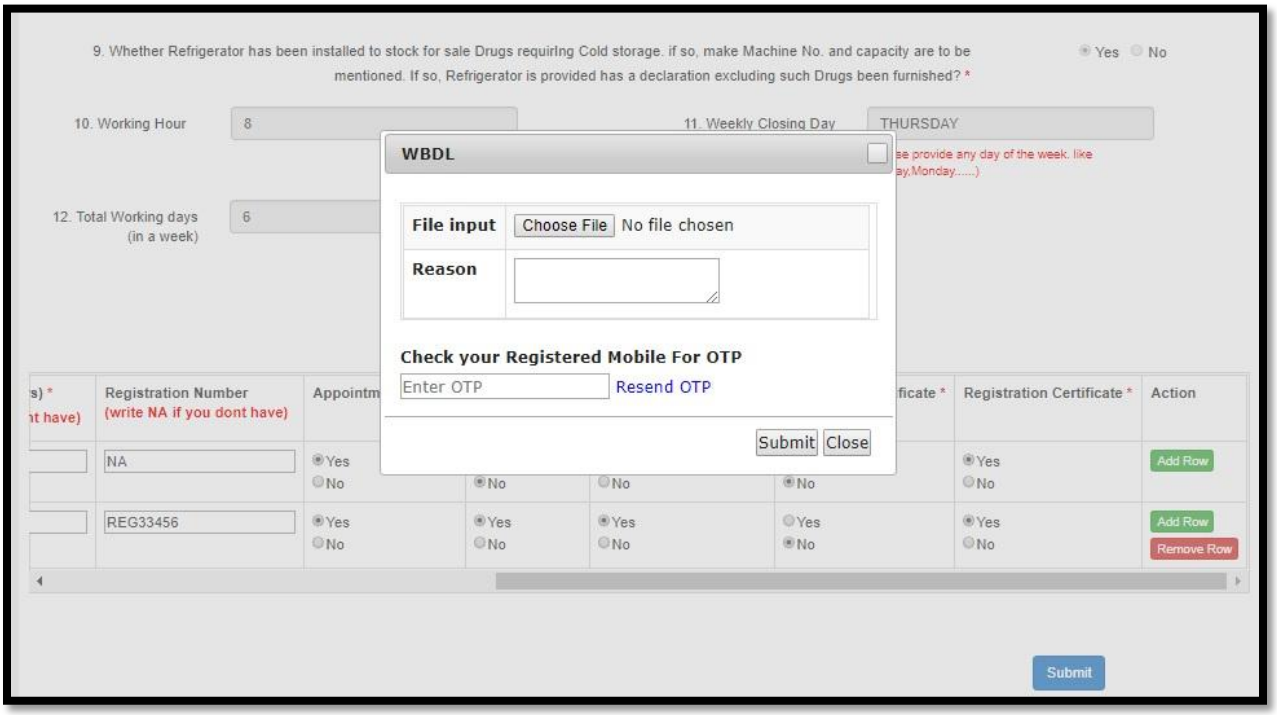


User will enter new Pharmacist details in the new created row

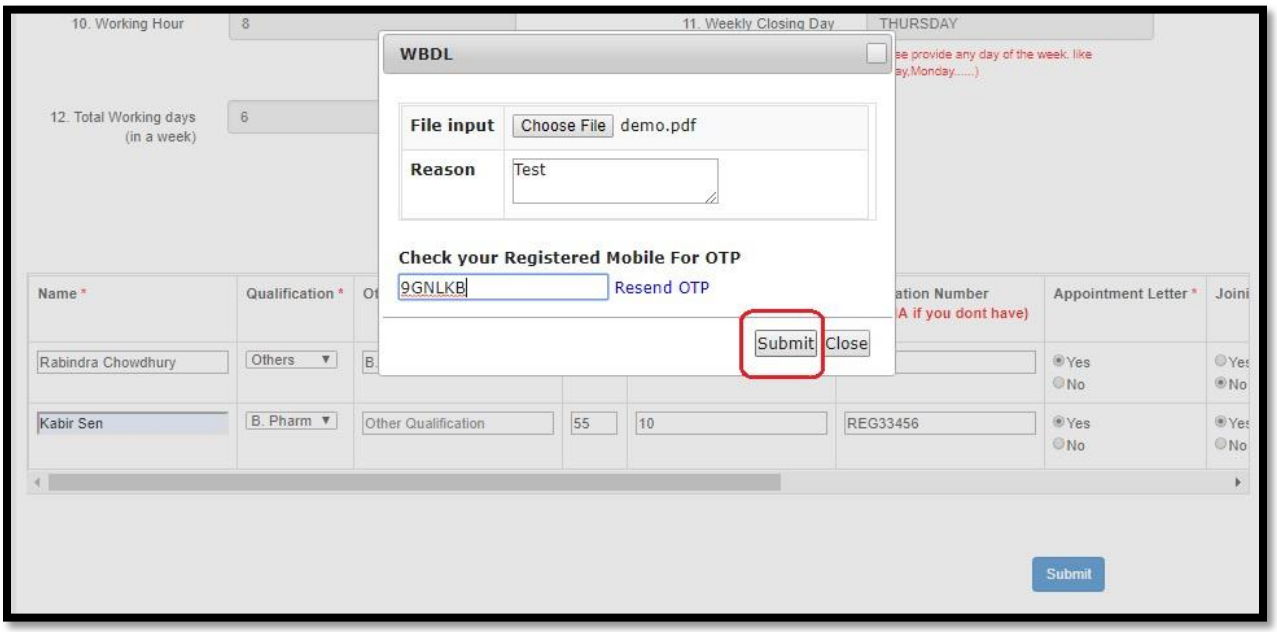


After adding the Pharmacist details User will click on 'Submit' button.

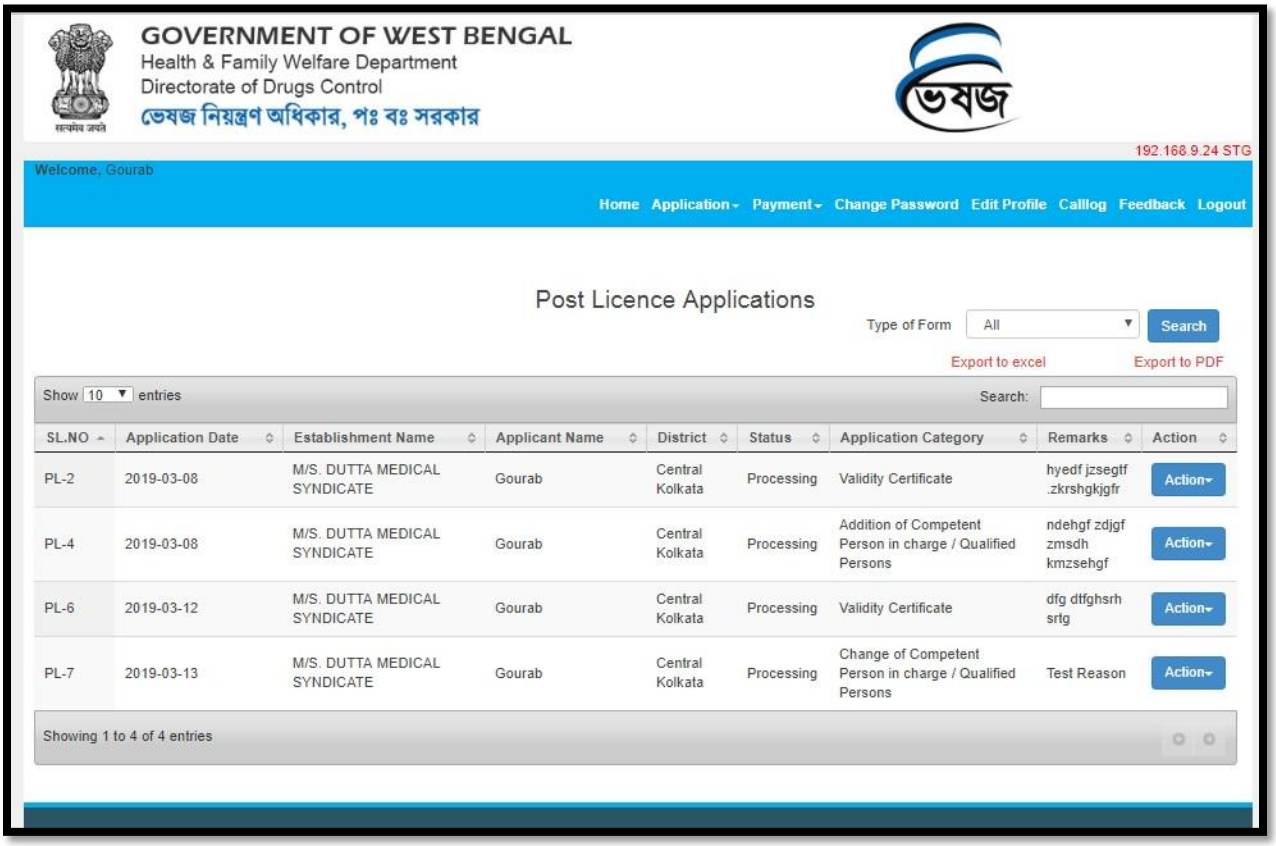
A popup will arise as shown below



User will upload a document and write a reason for this new Pharmacist addition. After that User will enter their OTP for confirmation and 'Submit' the Application.



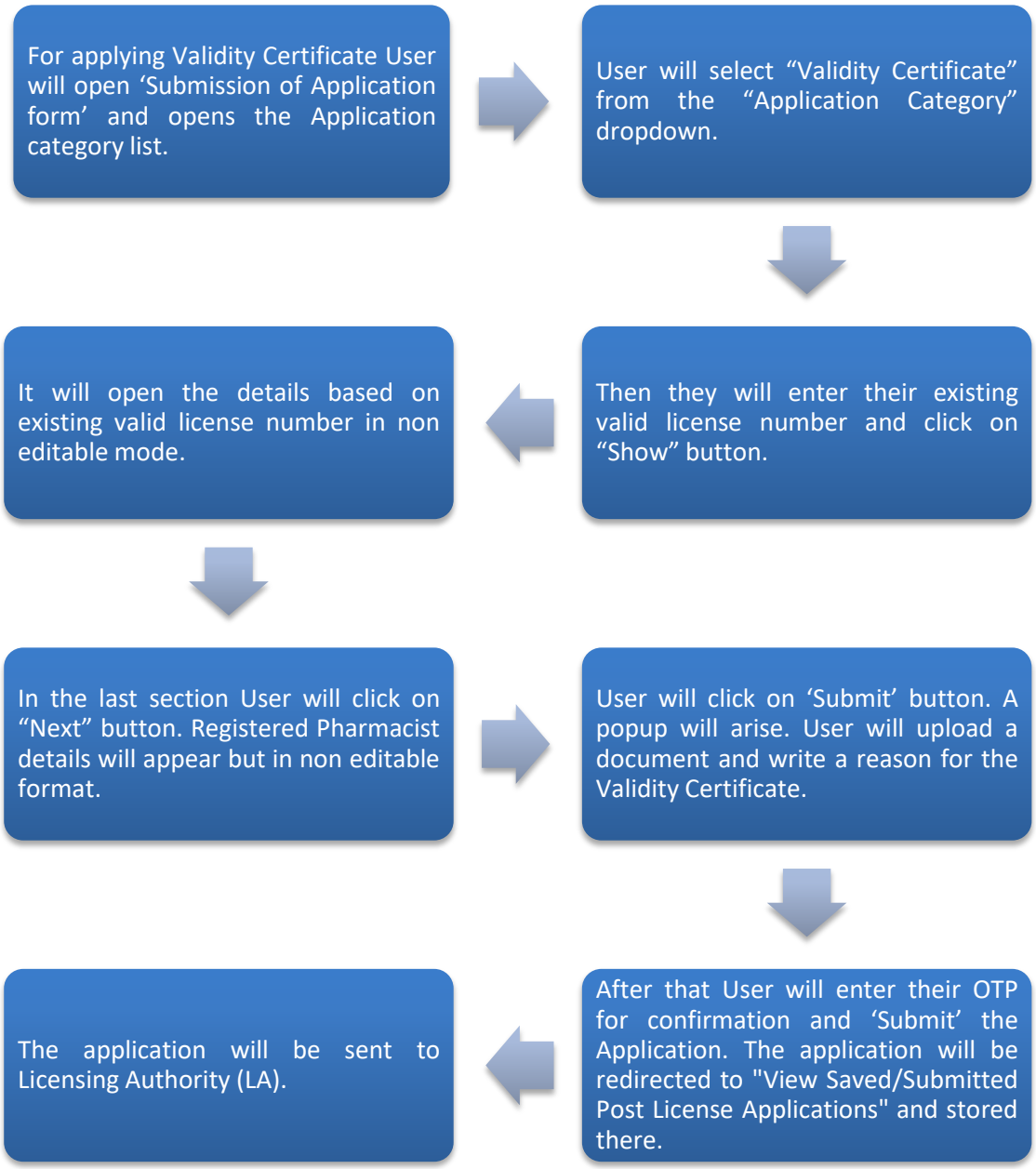
The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).



25 Validity Certificate

For applying Validity Certificate User will open ‘Submission of Application form’ and opens the Application category list. User will select “Validity Certificate” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button. It will open the details based on existing valid license number in non editable mode. In the last section User will click on “Next” button. Registered Pharmacist details will appear but in non editable format. User will click on ‘Submit’ button. A popup will arise. User will upload a document and write a reason for the Validity Certificate. After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will be redirected to "View Saved/Submitted Post License Applications" and stored there. The application will be sent to Licensing Authority (LA).

25.1 Process Flow

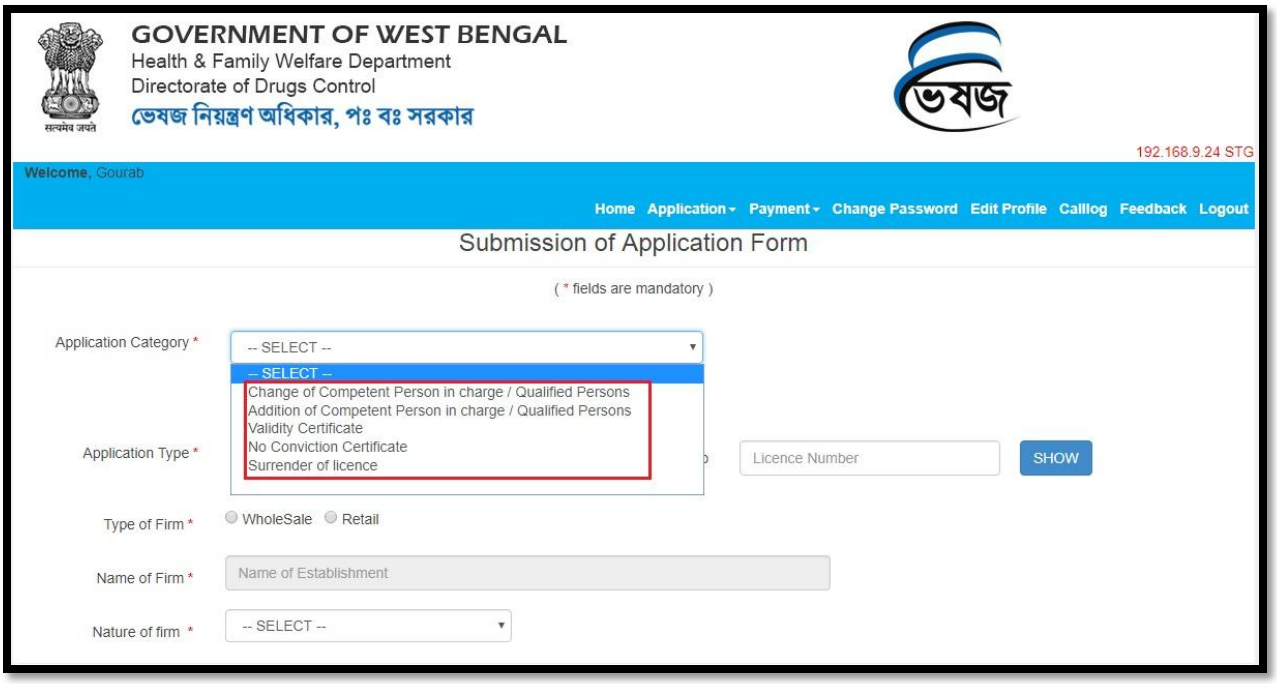


25.2 Detailed Steps

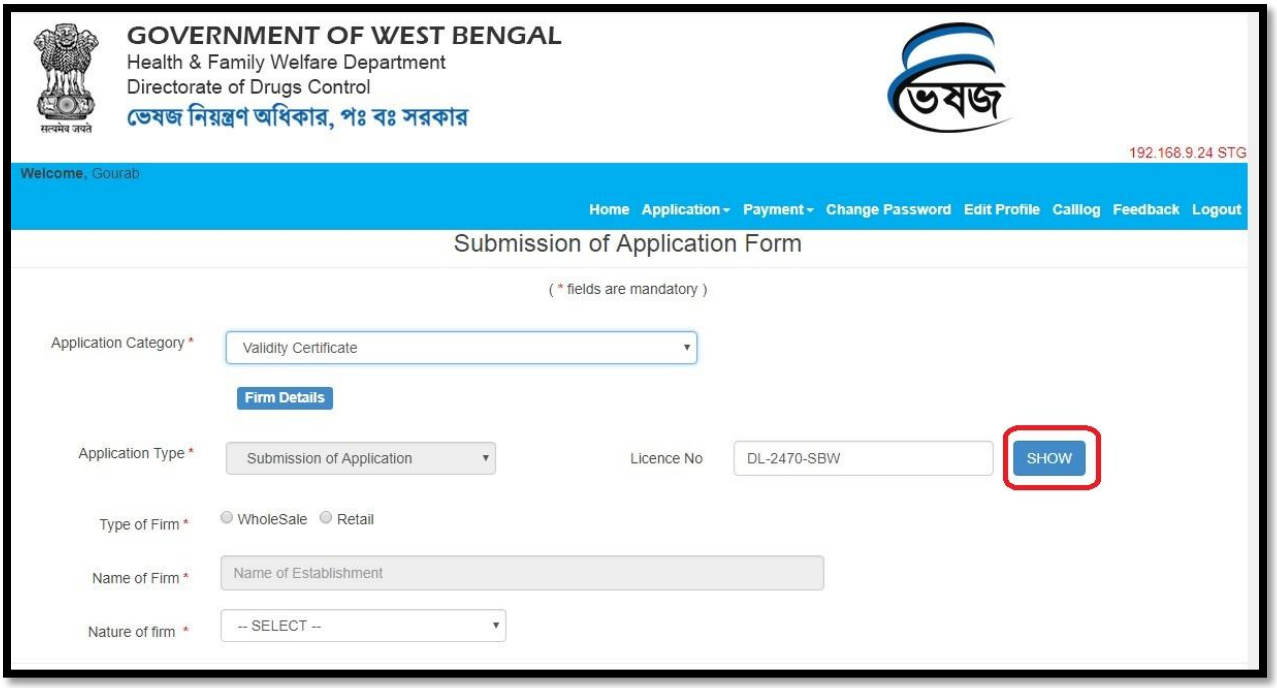
- For applying Validity Certificate User will open ‘Submission of Application form’ and opens the Application category list.
- User will select “Validity Certificate” from the “Application Category” dropdown.
- Then they will enter their existing valid license number and click on “Show” button.
- It will open the details based on existing valid license number in non editable mode.
- In the last section User will click on “Next” button. Registered Pharmacist details will appear but in non editable format.
- User will click on ‘Submit’ button. A popup will arise. User will upload a document and write a reason for the Validity Certificate.
- After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will be redirected to "View Saved/Submitted Post License Applications" and stored there.
- The application will be sent to Licensing Authority (LA).

25.3 Screenshot View

For applying Validity Certificate User will open ‘Submission of Application form’ and opens the Application category list.



User will select “Validity Certificate” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button.



It will open the details based on existing valid license number in non editable mode.

Submission of Application Form

(* fields are mandatory)

Application Category * : Validity Certificate

Firm Details

Application Type * : Submission of Application

Licence No : DL-2470-SBW SHOW

Type of Firm * : WholeSale Retail

Name of Firm * : M/S. DUTTA MEDICAL SYNDICATE

Nature of firm * : Proprietorship

Address of Firm

Building No/ Holding No/Daag No * : 55

Street Name * : B.R.B. BASU ROAD

Address Line 1 * : BLOCK-J, MEHTA BLDG, ROOM NO-161, KOL-1

Address Line 2 (please specify Room No/ Floor No if availble) : Address

District * : Central Kolkata

Post Office For Kolkata : Kolkata GPO

Police Station : HARE STREET

City/Village * : KOLKATA

Pin Code * : 700001

Local Authority * : KMA

Contact Details of establishment

Email ID * : hdutta2009@yahoo.co.in

Landline : Landline (ex:033-xxxx-xxxx)

Mobile * : 9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted : B. COM

Modification of Credentials* : Not Applicable

Service Details

Categories of drugs to be sold * : Bio And Non Bio

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises : Yes No

Actual floor space area* (Min 108 sq.ft) : 170 sqft.

Height from floor to ceiling : 10 ft.

Trade Licence : Applied for Licence Available

In the last section User will click on “Next” button

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * BRICK BUILD, PLASTERED WALL

2. Nature of Ceiling * RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

4. Do you have any other Drug Licence? * Yes No

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Rented

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirIng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 8

11. Weekly Closing Day THURSDAY

(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

Next

Registered Pharmacist details will appear but in non editable format. User will click on ‘Submit’ button

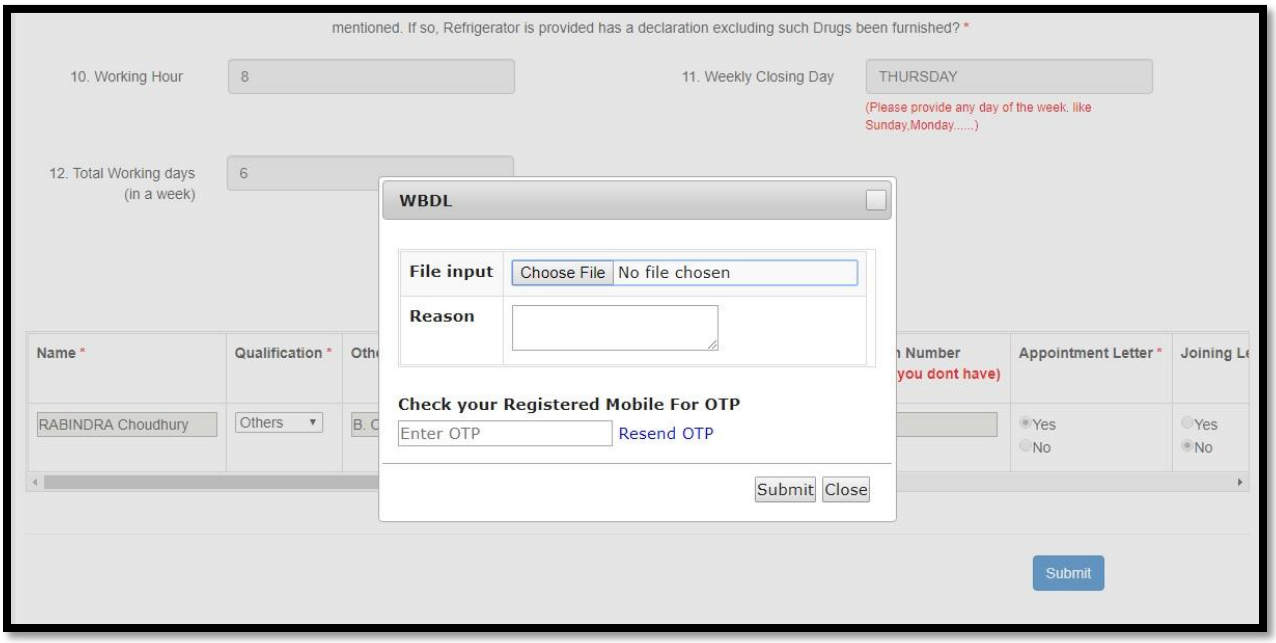
Registered Pharmacist Details

Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joini
RABINDRA Choudhury	Others	B. COM	76	20	NA	Yes No	Yes No

Submit

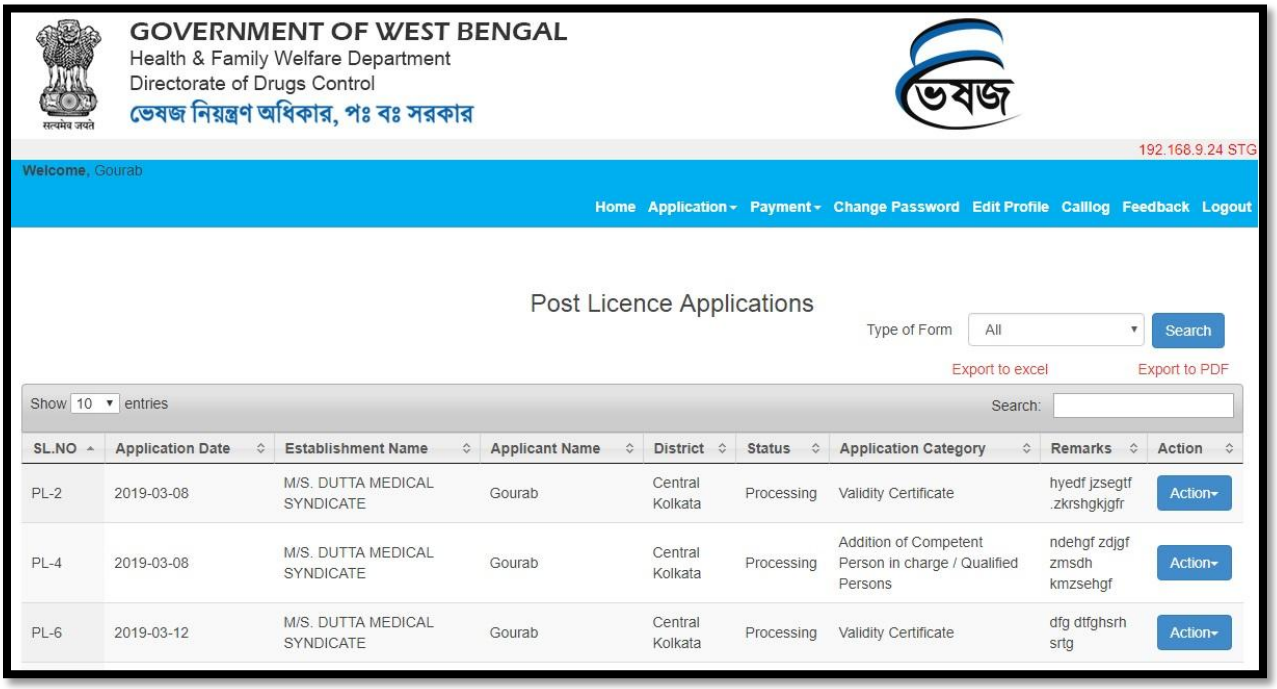
Information Technology Cell, Department of Health and Family Welfare, Government of West Bengal

A popup will arise as shown below



User will upload a document and write a reason for the Validity Certificate. After that User will enter their OTP for confirmation and 'Submit' the Application.

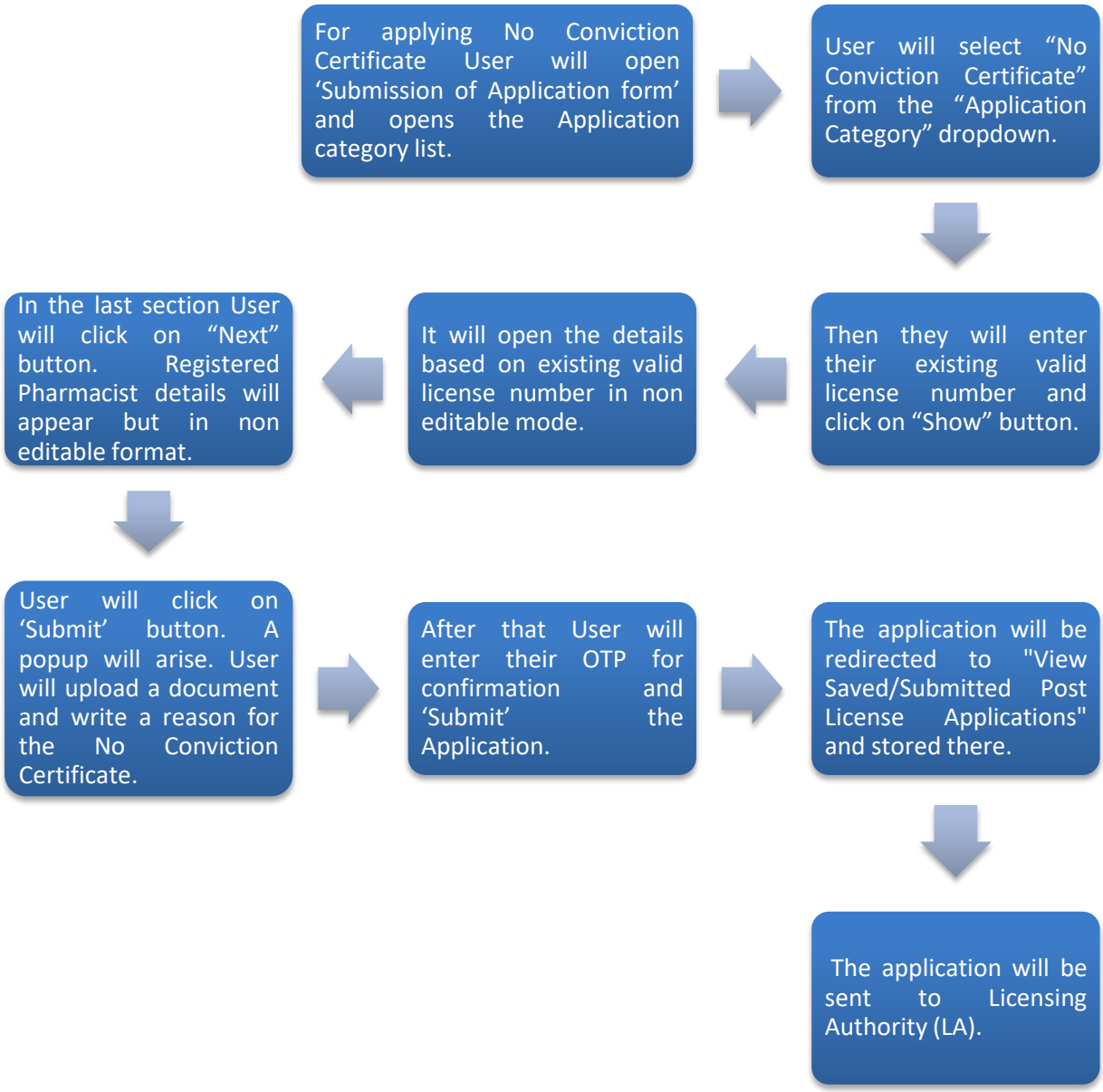
The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).



26 No Conviction Certificate

For applying No Conviction Certificate User will open ‘Submission of Application form’ and opens the Application category list. User will select “No Conviction Certificate” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button. It will open the details based on existing valid license number in non editable mode. In the last section User will click on “Next” button. Registered Pharmacist details will appear but in non editable format. User will click on ‘Submit’ button. A popup will arise. User will upload a document and write a reason for the No Conviction Certificate. After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will be redirected to "View Saved/Submitted Post License Applications" and stored there. The application will be sent to Licensing Authority (LA).

26.1 Process Flow

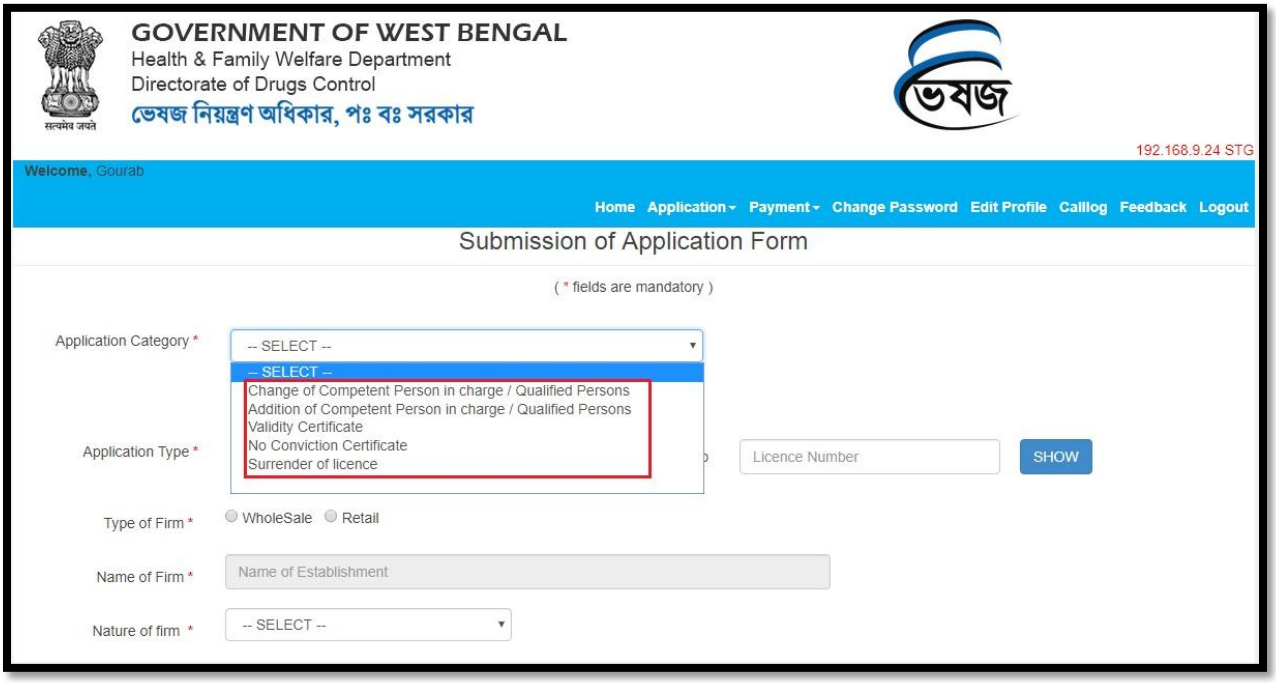


26.2 Detailed Steps

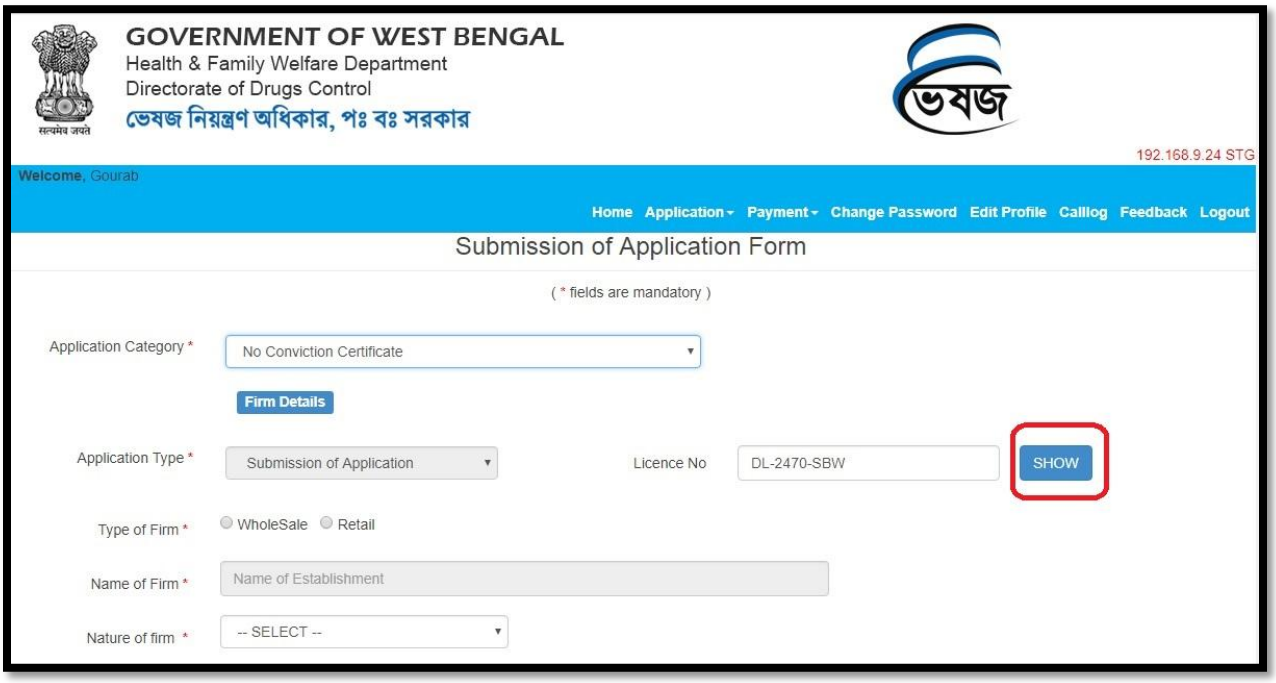
- For applying No Conviction Certificate User will open ‘Submission of Application form’ and opens the Application category list.
- User will select “No Conviction Certificate” from the “Application Category” dropdown.
- Then they will enter their existing valid license number and click on “Show” button.
- It will open the details based on existing valid license number in non editable mode.
- In the last section User will click on “Next” button. Registered Pharmacist details will appear but in non editable format.
- User will click on ‘Submit’ button. A popup will arise. User will upload a document and write a reason for the No Conviction Certificate.
- After that User will enter their OTP for confirmation and ‘Submit’ the Application.
- The application will be redirected to "View Saved/Submitted Post License Applications" and stored there.
- The application will be sent to Licensing Authority (LA).

26.3 Screenshot View

For applying No Conviction Certificate User will open ‘Submission of Application form’ and opens the Application category list.



User will select “No Conviction Certificate” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button.



It will open the details based on existing valid license number in non editable mode.

Submission of Application Form

(* fields are mandatory)

Application Category * No Conviction Certificate

Firm Details

Application Type * Submission of Application

Licence No DL-2470-SBW SHOW

Type of Firm * WholeSale Retail

Name of Firm * M/S. DUTTA MEDICAL SYNDICATE

Nature of firm * Proprietorship

Address of Firm *

Building No/ Holding No/Daag No * 55

Street Name * B.R.B. BASU ROAD

Address Line 1 * BLOCK-J, MEHTA BLDG, ROOM NO-161, KOL-1

Address Line 2 (please specify Room No/ Floor Address

No if availble)

District * Central Kolkata

Post Office For Kolkata Kolkata GPO

Police Station HARE STREET

City/Village * KOLKATA

Pin Code * 700001

Local Authority * KMA

Contact Details of establishment

Email ID * hdutta2009@yahoo.co.in

Landline Landline

(ex:033-xxxx-xxxx)

Mobile * 9874481064

(Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted B. COM

Modification of Credentials* Not Applicable

Service Details

Categories of drugs to be sold * Bio And Non Bio

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises Yes No

Actual floor space area* (Min 108 sq.ft) 170 sqft.

Height from floor to ceiling 10 ft.

Trade Licence Applied for Licence Available

Additional Information Form for Grant of Licences to Sell Drugs

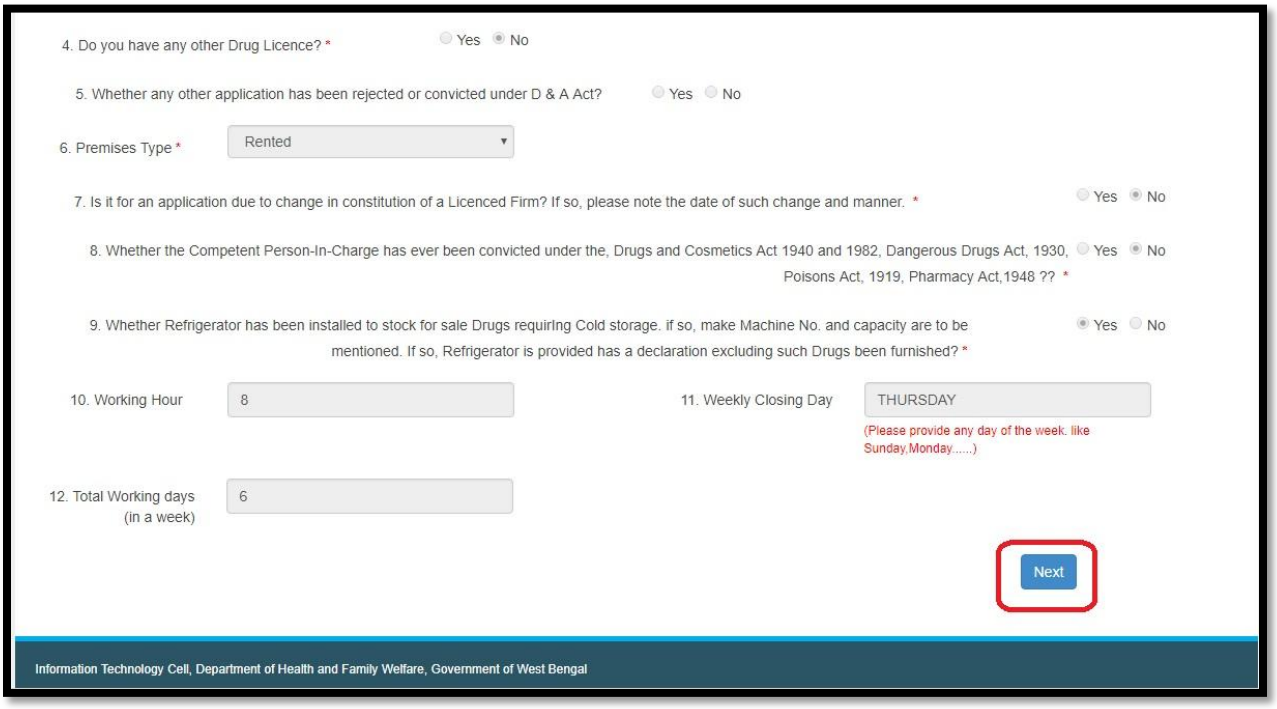
Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). * BRICK BUILD, PLASTERED WALL

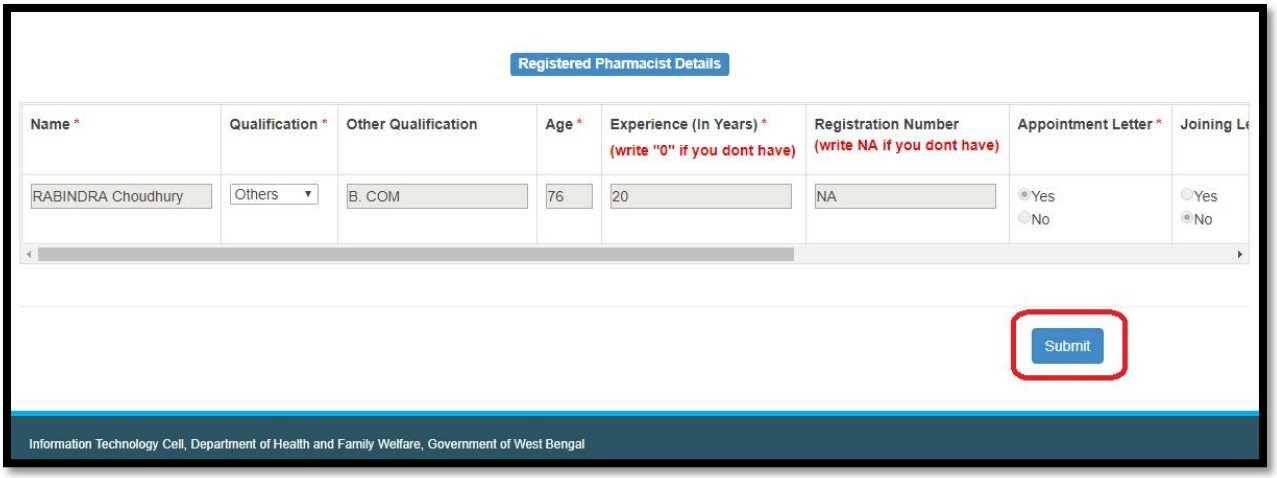
2. Nature of Ceiling * RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed * Yes No

In the last section User will click on “Next” button

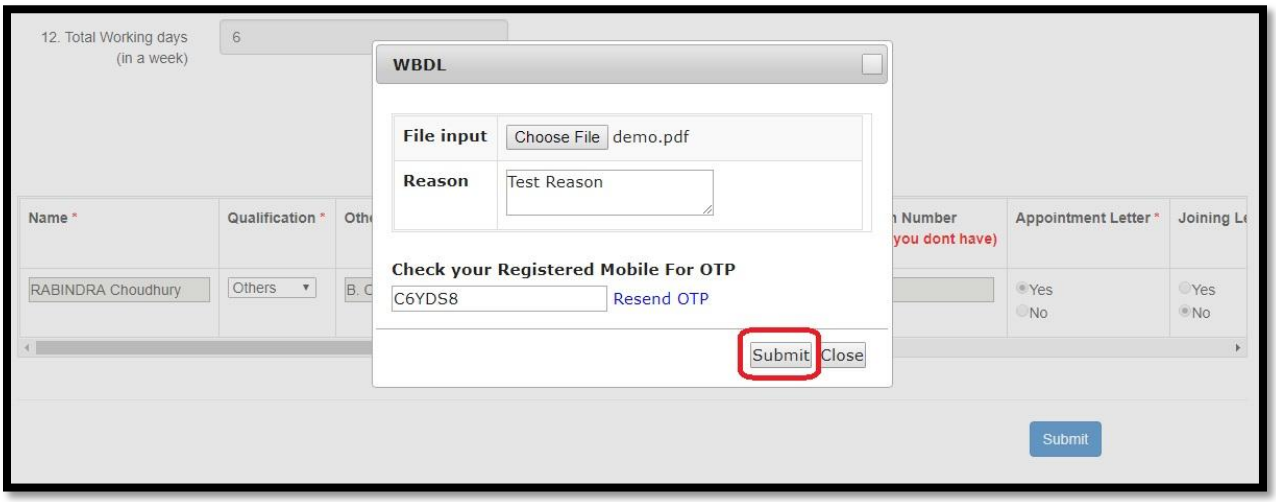


Registered Pharmacist details will appear but in non editable format. User will click on ‘Submit’ button

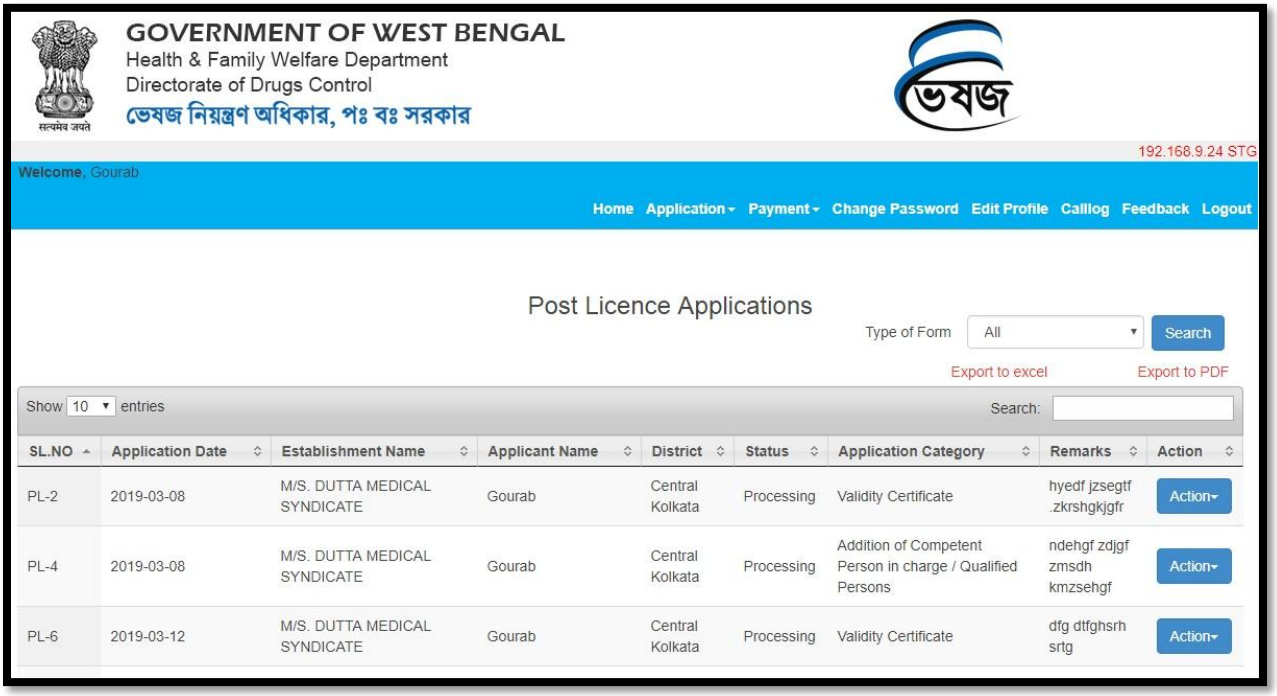


A popup will arise as shown below

User will upload a document and write a reason for the No Conviction Certificate. After that User will enter their OTP for confirmation and 'Submit' the Application.



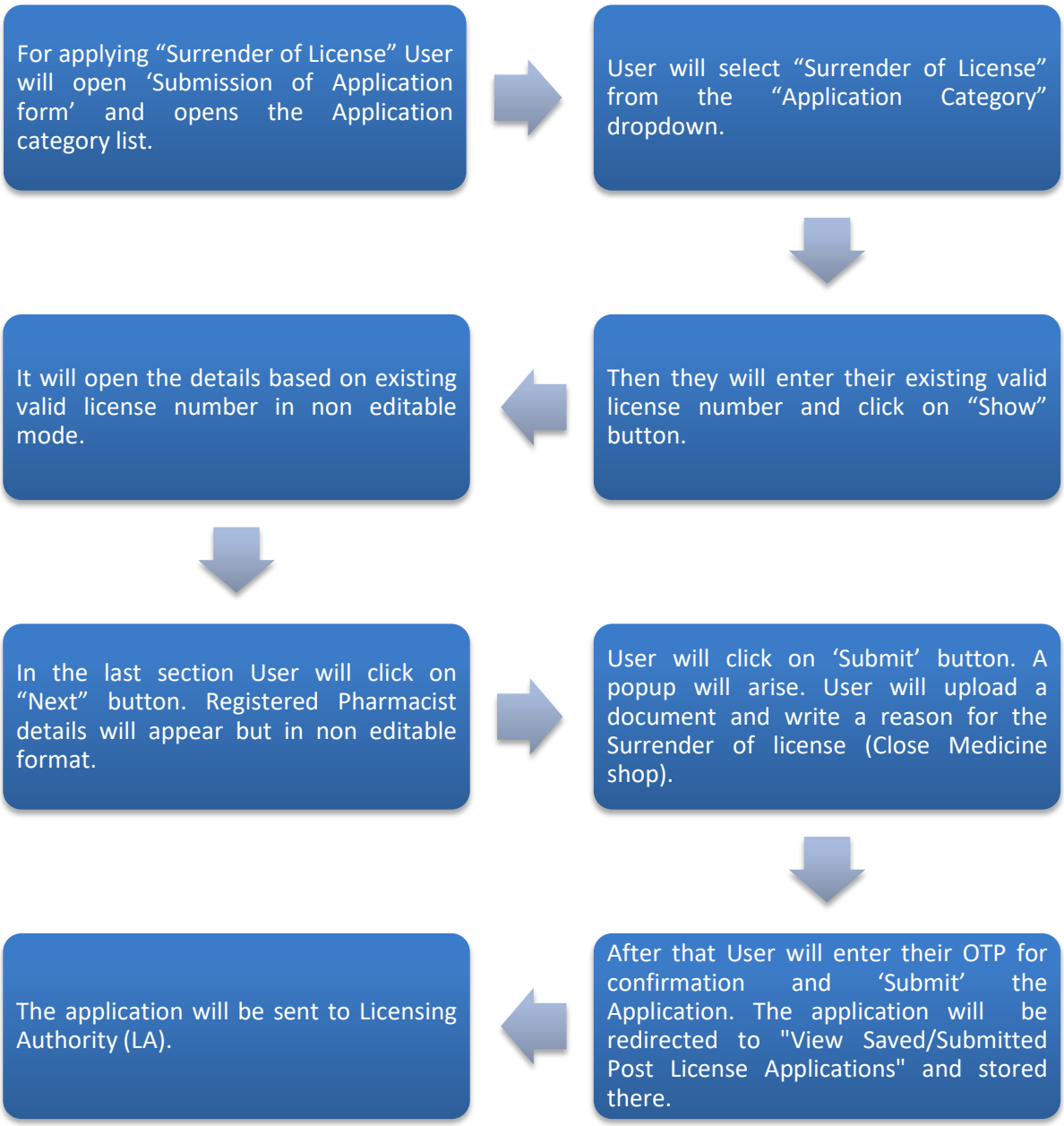
The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).



27 Surrender of license (Close Medicine shop)

For applying “Surrender of License” User will open ‘Submission of Application form’ and opens the Application category list. User will select “Surrender of License” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button. It will open the details based on existing valid license number in non editable mode. In the last section User will click on “Next” button. Registered Pharmacist details will appear but in non editable format. User will click on ‘Submit’ button. A popup will arise as shown below. User will upload a document and write a reason for the Surrender of license (Close Medicine shop). After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application will be sent to Licensing Authority (LA).

27.1 Process Flow

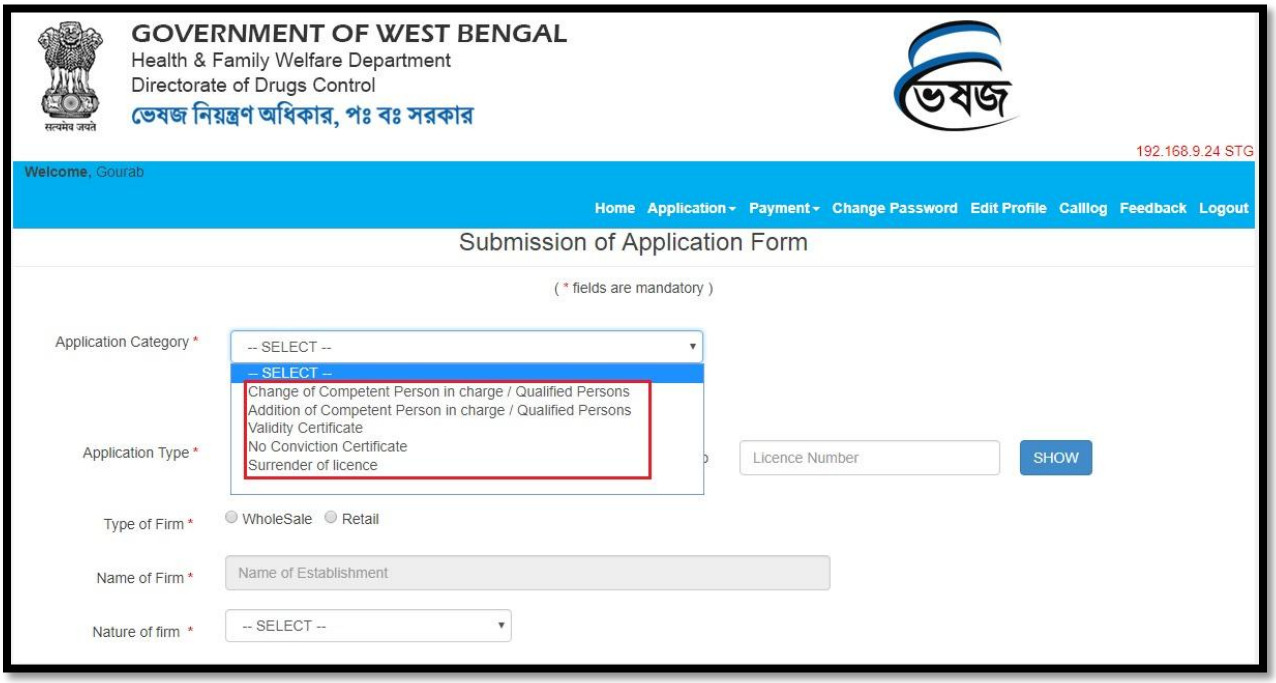


27.2 Detailed Steps

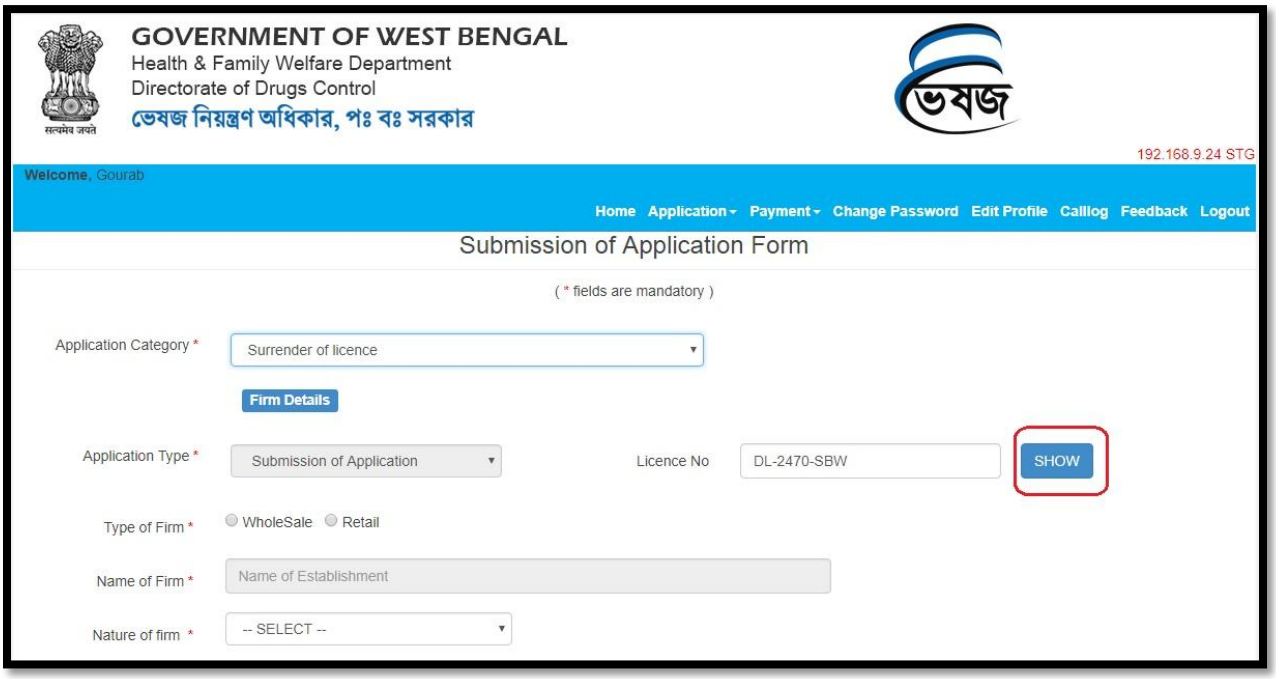
- For applying “Surrender of License” User will open ‘Submission of Application form’ and opens the Application category list.
- User will select “Surrender of License” from the “Application Category” dropdown.
- Then they will enter their existing valid license number and click on “Show” button.
- It will open the details based on existing valid license number in non editable mode.
- In the last section User will click on “Next” button. Registered Pharmacist details will appear but in non editable format.
- User will click on ‘Submit’ button. A popup will arise. User will upload a document and write a reason for the Surrender of license (Close Medicine shop).
- After that User will enter their OTP for confirmation and ‘Submit’ the Application. The application will be redirected to "View Saved/Submitted Post License Applications" and stored there.
- The application will be sent to Licensing Authority (LA).

27.3 Screenshot View

For applying “Surrender of License” User will open ‘Submission of Application form’ and opens the Application category list.



User will select “Surrender of License” from the “Application Category” dropdown. Then they will enter their existing valid license number and click on “Show” button.



It will open the details based on existing valid license number in non editable mode.

Submission of Application Form

(* fields are mandatory)

Application Category * Surrender of licence

Firm Details

Application Type * Submission of Application

Licence No DL-2470-SBW SHOW

Type of Firm * WholeSale Retail

Name of Firm * M/S. DUTTA MEDICAL SYNDICATE

Nature of firm * Proprietorship

Address of Firm *

Building No/ Holding No/Daag No * 55

Street Name * B.R.B. BASU ROAD

Address Line 1 * BLOCK-J, MEHTA BLDG, ROOM NO-161, KOL-1

Address Line 2 (please specify Room No/ Floor No if availble): Address

District *: Central Kolkata

Post Office For Kolkata: Kolkata GPO

Police Station: HARE STREET

City/Village *: KOLKATA

Pin Code *: 700001

Local Authority *: KMA

Contact Details of establishment

Email ID *: hdutta2009@yahoo.co.in

Landline: Landline (ex:033-xxxx-xxxx)

Mobile *: 9874481064 (Please give authentic mobile number. All communication will be done in this mobile number.)

Qualification of the person responsible for operation if granted: B. COM

Modification of Credentials*: Not Applicable

Service Details

Categories of drugs to be sold *: Bio And Non Bio

Particulars of storage accommodation for Schedules C and C(I) drugs in the premises: Yes No

Actual floor space area* (Min 108 sq.ft): 170 sqft.

Height from floor to ceiling: 10 ft.

Trade Licence: Applied for Licence Available

Additional Information Form for Grant of Licences to Sell Drugs

Application for Grant or Renewal of a Licence to Sell,Stock or exhibit for Sale or Distribute Drugs

1. A brief statement on construction of the premises (whether Brick Built. Plastered and Floor Cemented Roofing and Ceiling). *: BRICK BUILD, PLASTERED WALL

2. Nature of Ceiling *: RCC

3. Trade LIcences / Tax Receipt from the Local Govt/Panchayat has been enclosed *: Yes No

4. Do you have any other Drug Licence? *: Yes No

In the last section User will click on “Next” button

5. Whether any other application has been rejected or convicted under D & A Act? Yes No

6. Premises Type * Rented

7. Is it for an application due to change in constitution of a Licenced Firm? If so, please note the date of such change and manner. * Yes No

8. Whether the Competent Person-In-Charge has ever been convicted under the, Drugs and Cosmetics Act 1940 and 1982, Dangerous Drugs Act, 1930, Poisons Act, 1919, Pharmacy Act,1948 ?? * Yes No

9. Whether Refrigerator has been installed to stock for sale Drugs requirlng Cold storage. if so, make Machine No. and capacity are to be mentioned. If so, Refrigerator is provided has a declaration excluding such Drugs been furnished? * Yes No

10. Working Hour 8

11. Weekly Closing Day THURSDAY

(Please provide any day of the week. like Sunday,Monday.....)

12. Total Working days (in a week) 6

Next

Registered Pharmacist details will appear but in non editable format. User will click on ‘Submit’ button

Registered Pharmacist Details

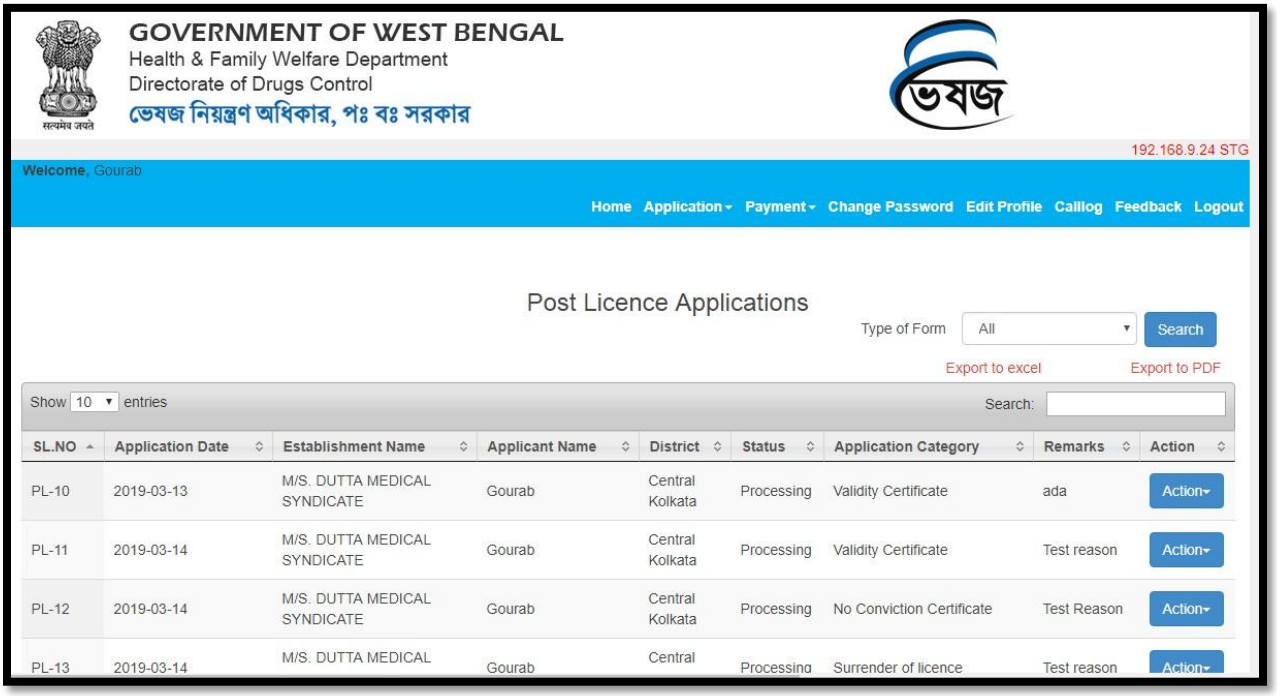
Name *	Qualification *	Other Qualification	Age *	Experience (In Years) * (write "0" if you dont have)	Registration Number (write NA if you dont have)	Appointment Letter *	Joining Le
RABINDRA Choudhury	Others	B. COM	76	20	NA	Yes No	Yes No

Submit

A popup will arise as shown below

User will upload a document and write a reason for the Surrender of license (Close Medicine shop). After that User will enter their OTP for confirmation and 'Submit' the Application

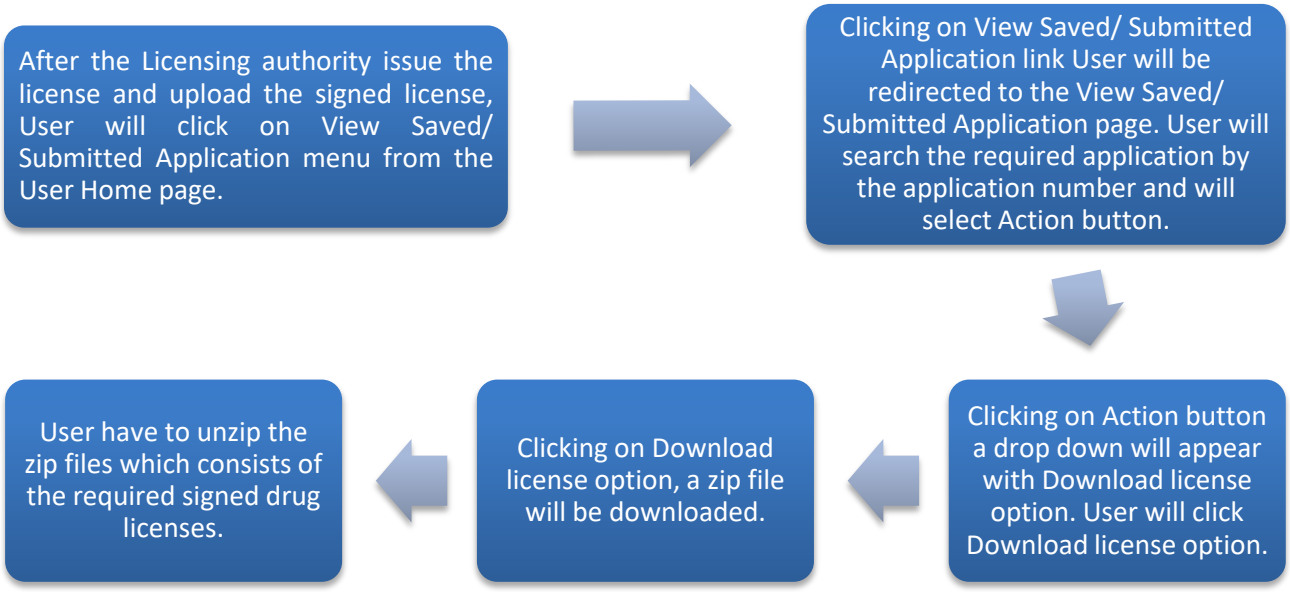
The application will redirect to "View Saved/Submitted Post License Applications" and stored there. The application sent to Licensing Authority (LA).



28 Download Signed License

Licensing authority issues the required Drug License and takes a printout of the same. Next they post signature in the drug license printout and scan the signed copy. After that they upload the license. Whenever they upload the signed licensee User will receive the same in their profile. Detailed procedure mentioned in 22.1.

28.1 Process Flow

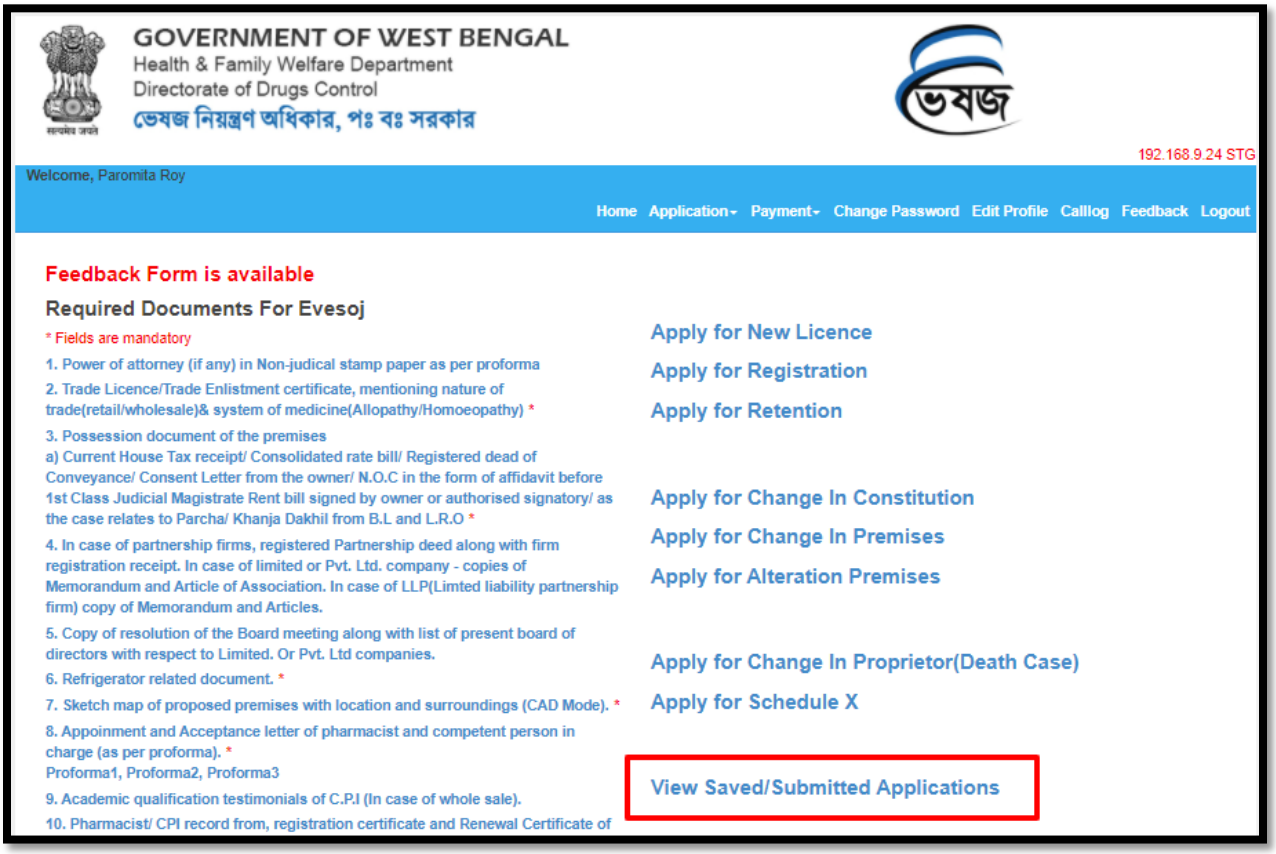


28.2 Detailed Steps

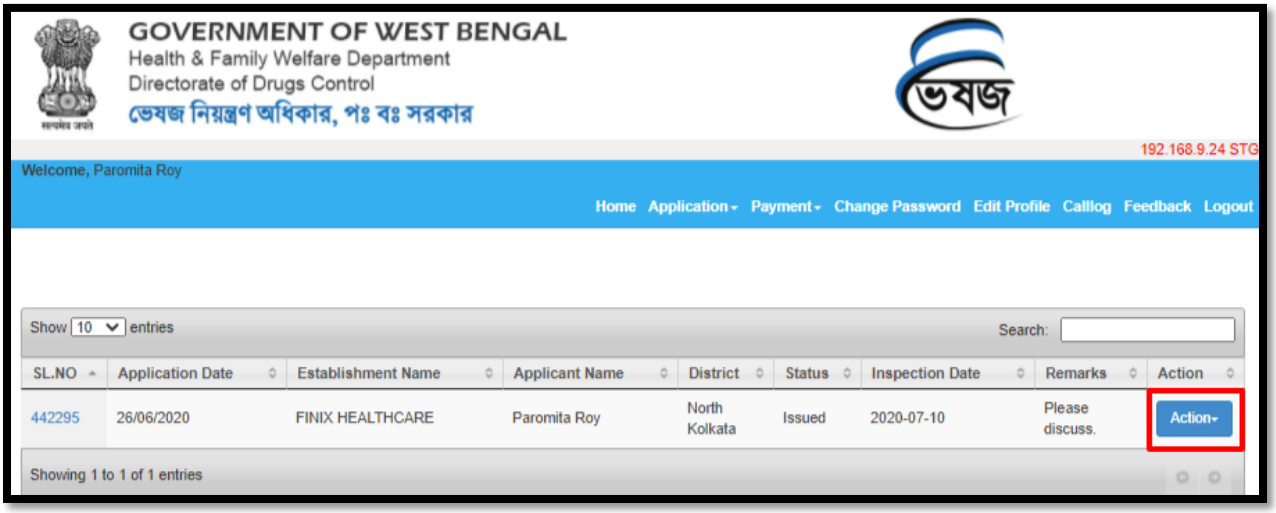
- After the Licensing authority issue the license and upload the signed license, User will click on View Saved/ Submitted Application menu from the User Home page.
- Clicking on View Saved/ Submitted Application link User will be redirected to the View Saved/ Submitted Application page. User will search the required application by the application number and will select Action button.
- Clicking on Action button a drop down will appear with Download license option. User will click Download license option.
- Clicking on Download license option, a zip file will be downloaded.
- User have to unzip the zip files which consists of the required signed drug licenses.

28.3 Screenshot View

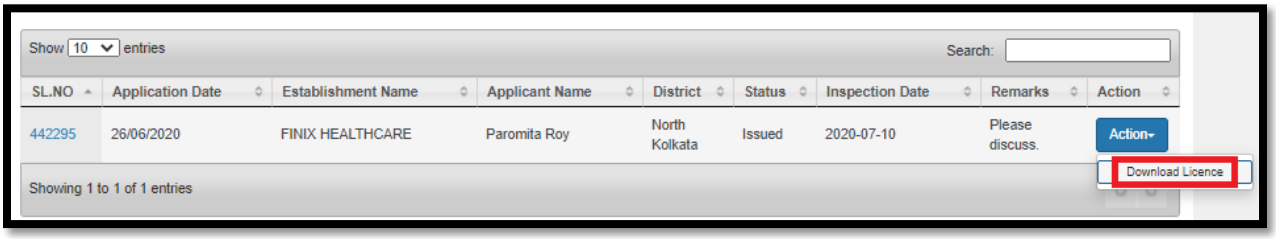
After the Licensing authority issue the license and upload the signed license, User will click on View Saved/ Submitted Application menu from the User Home page.



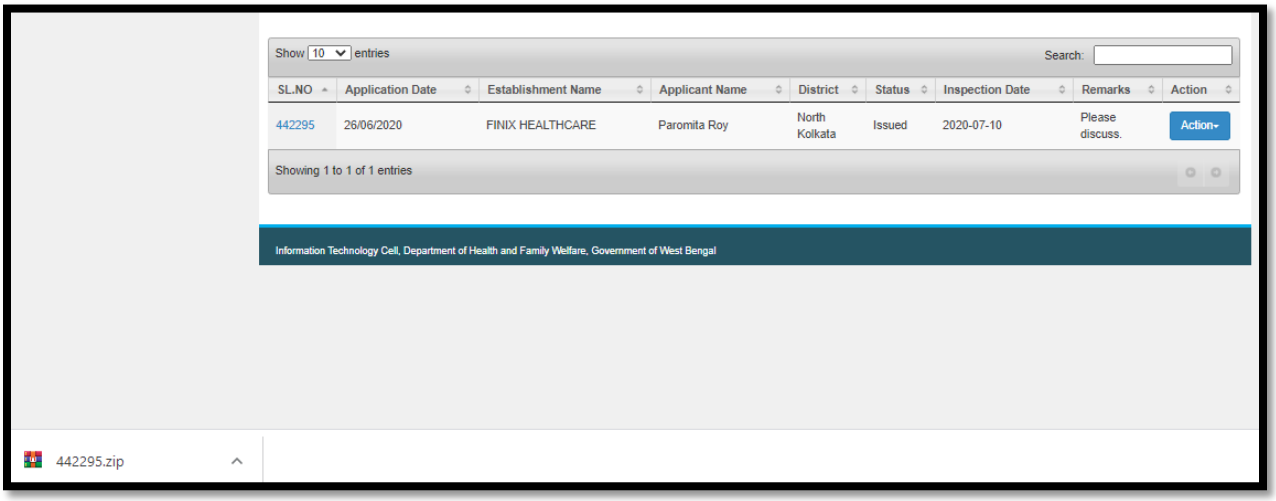
Clicking on View Saved/ Submitted Application link User will be redirected to the View Saved/ Submitted Application page. User will search the required application by the application number and will select Action button.



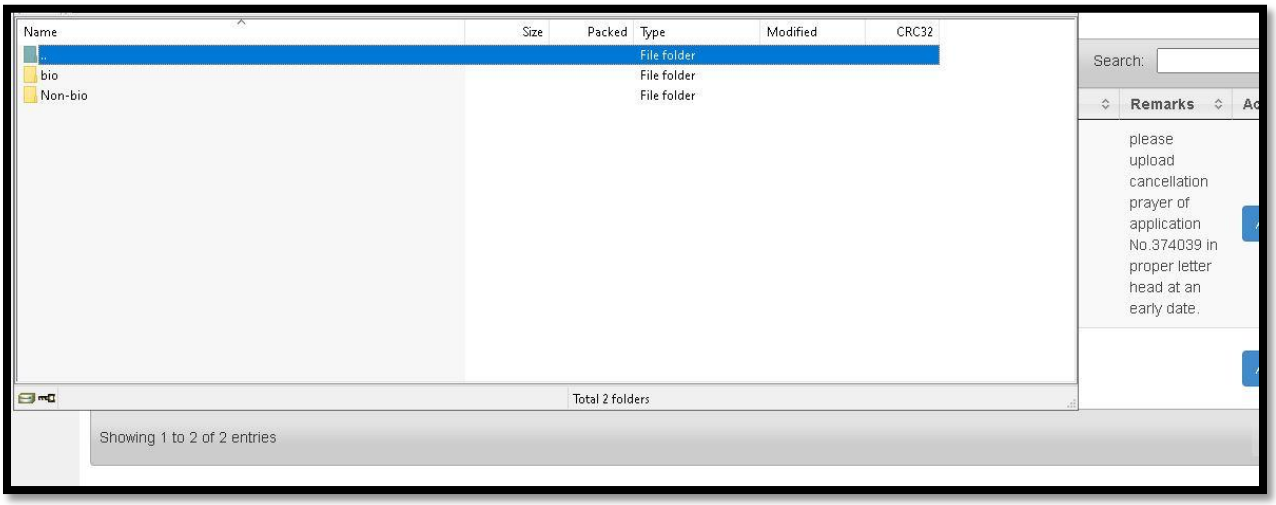
Clicking on Action button a drop down will appear with Download license option. User will click Download license option.



Clicking on Download license option, a zip file will be downloaded.



User have to unzip the zip files which consists of the required signed drug licenses.



12/10/2020

Department Of Health And Family Welfare, Government Of West Bengal

DIRECTORATE OF DRUGS CONTROL WEST BENGAL

THE DRUGS & COSMETICS RULES, 1945

FORM - 21

[See Rule 61(2)]

LICENCE TO SELL, STOCK OR EXHIBIT OR OFFER FOR SALE OR DISTRIBUTE BY RETAIL DRUGS SPECIFIED IN SCHEDULES "C" AND "C(1)" [EXCLUDING THOSE SPECIFIED IN SCH. X]

NO DISPENSING

1. M/S HEALTHBUDDY RIDHI DAIVIK
   is hereby licensed to sell, stock or exhibit or offer for sale or distribute by retail the following categories of drugs specified in Schedules C & C(1) [excluding those specified in Sch. X] to the Drugs and Cosmetics Rules, 1945* and to operate a pharmacy on the premises situated at
   42, Vivekananda Road, Ground Floor Ward No 25, , Burrabazar, Girish Park, Kolkata, 700007
   subject to the conditions specified below and to the provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.

2. The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics Act, 1940 (23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less once in three years or as per risk based approach.
3. Name(s) of Registered Pharmacist(s) in-charge.

Name	Qualification	Registration No
PRATEEK BANERJEE	B.Pharm	A-12837

4. Categories of drugs: Biological

Date: 10/12/2020

Date:

licence No. WB/KOL/BIO/R/451771

LICENSING AUTHORITY

All Drugs of Schedule C & CI.

Asstt. Director (LA)
Central Kolkata Zone
Drugs Control HO

*Delete if not applicable

12/10/2020

Department Of Health And Family Welfare, Government Of West Bengal

DIRECTORATE OF DRUGS CONTROL WEST BENGAL

THE DRUGS & COSMETICS RULES, 1945

FORM - 20

[See Rule 61(1)]

LICENCE TO SELL, STOCK OR EXHIBIT OR OFFER FOR SALE, OR DISTRIBUTE DRUGS BY RETAIL OTHER THAN THOSE SPECIFIED IN [SCHEDULES "C", "C(1)" AND "X"]

NO DISPENSING

1. M/S HEALTHBUDDY RIDHI DAIVIK
   is hereby licensed to sell, stock or exhibit or offer for sale or distribute by retail drugs other than those specified in [Schedules C , C(1) and X] of the Drugs & Cosmetics Rules, 1945* and to operate a pharmacy on the premises situated at
   42, Vivekananda Road, Ground Floor Ward No 25, , Burrabazar, Girish Park, Kolkata, 700007
   subject to the conditions specified below and to the provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.

2. The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics Act, 1940 (23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less once in three years or as per risk based approach.
3. Name(s) of Registered Pharmacist(s) in-charge.

Name	Qualification	Registration No
PRATEEK BANERJEE	B.Pharm	A-15687

4. Categories of drugs: Non Biological

Date: 10/12/2020

Date:

licence No. WB/KOL/NBO/R/451771

LICENSING AUTHORITY

Other than those specified in schedule C & CI.

Asstt. Director (LA)
Central Kolkata Zone
Drugs Control HO

*Delete if not applicable

29 View Saved/Submitted Post License Applications

It is to be noted that when the User submits the Post License Application it is forwarded to License Authority (LA). Now LA can do a number of things with the submitted applications like 'Approve the application', 'Reject the application', 'send the application back to User to Edit Documents', 'send the application back to User to Edit Pharmacy' and 'Show cause the User if required'.

If the LA 'Approves' the application the User will receive a SMS that "*Your post licensing application (Form No: PL-4) has been approved*".

If the LA 'Rejects' the application the User will receive a SMS that "*Your post licensing application (Form No: PL-8) has been rejected due to following reasons: …….*"

If the LA wants the User to 'Edit Documents' the User will receive a SMS that "*You are allowed to edit document in your post licensing application (Form No: PL-1).Please go to edit document option*" On receiving the SMS the User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen. Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them. On clicking this 'Action' button the user will view a list of options in which the first is 'Edit Document'. On clicking 'Edit Document' an 'OTP' will be generated and sent to User's mobile number and he/she will be redirected to a new screen where he/she will upload new document, add remarks and enter the OTP sent to his/her mobile number and finally click on 'Submit' button upon which the submitted documents will be forwarded to LA.

If LA 'Show causes' the User the User will receive a SMS that "*Your License has been Show caused, Please check your application for details*" On receiving the SMS the User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen. Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them. On clicking this 'Action' button the user will view a list of options in which there are two options 'Show caused Documents' and 'Show cause reply'. The user will click on 'Show caused Documents' to download the document that has been show caused by the LA. The User clicks on 'Show cause reply' an 'OTP' will be generated and sent to User's mobile number and he/she will be redirected to a new screen where he/she will upload new document, add 'Reasons' and enter the OTP sent to his/her mobile number and finally click on 'Submit' button upon which the submitted documents will be forwarded to LA.

After the User has replied for the show cause the LA if not satisfied with the reply can summon the User for Hearing. Also if the LA does not respond to the User's reply within 15 days from user's reply the User will be automatically summoned for hearing.

It is to be noted that all the above procedures discussed will be followed in case of 'Validity Certificate', 'No Conviction Certificate', 'Surrendering License', and also for 'Addition of Competent Person in charge / Qualified Persons (Adding Pharmacist)' and 'Change of Competent Person in charge / Qualified Persons (Editing Pharmacist)'. It is to note here that the LA can send for Inspection for later two cases.

If the LA want the User to Edit Pharmacist details then a SMS will be sent to the user stating "*You are allowed to edit pharmacist details in your post licensing application (Form No : PL-1).Please go to edit pharmacist details option*". On receiving the SMS the User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen. Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them. On clicking this 'Action' button the user will view a list of options in which there is an option 'Edit Pharmacist Details'. On clicking 'Edit Pharmacist Details' the User will be navigated to Registered Pharmacist Details page where the User enters name, qualification, other qualification, age, experience and registration number and finally clicks on submit to save the changes.

The LA can send for inspection if he wants after user has added or edited pharmacist details. In this case the user will get a SMS stating, "LA has sent your post licensing application (Form No: $) to IA for Inspection".

29.1 Process Flow

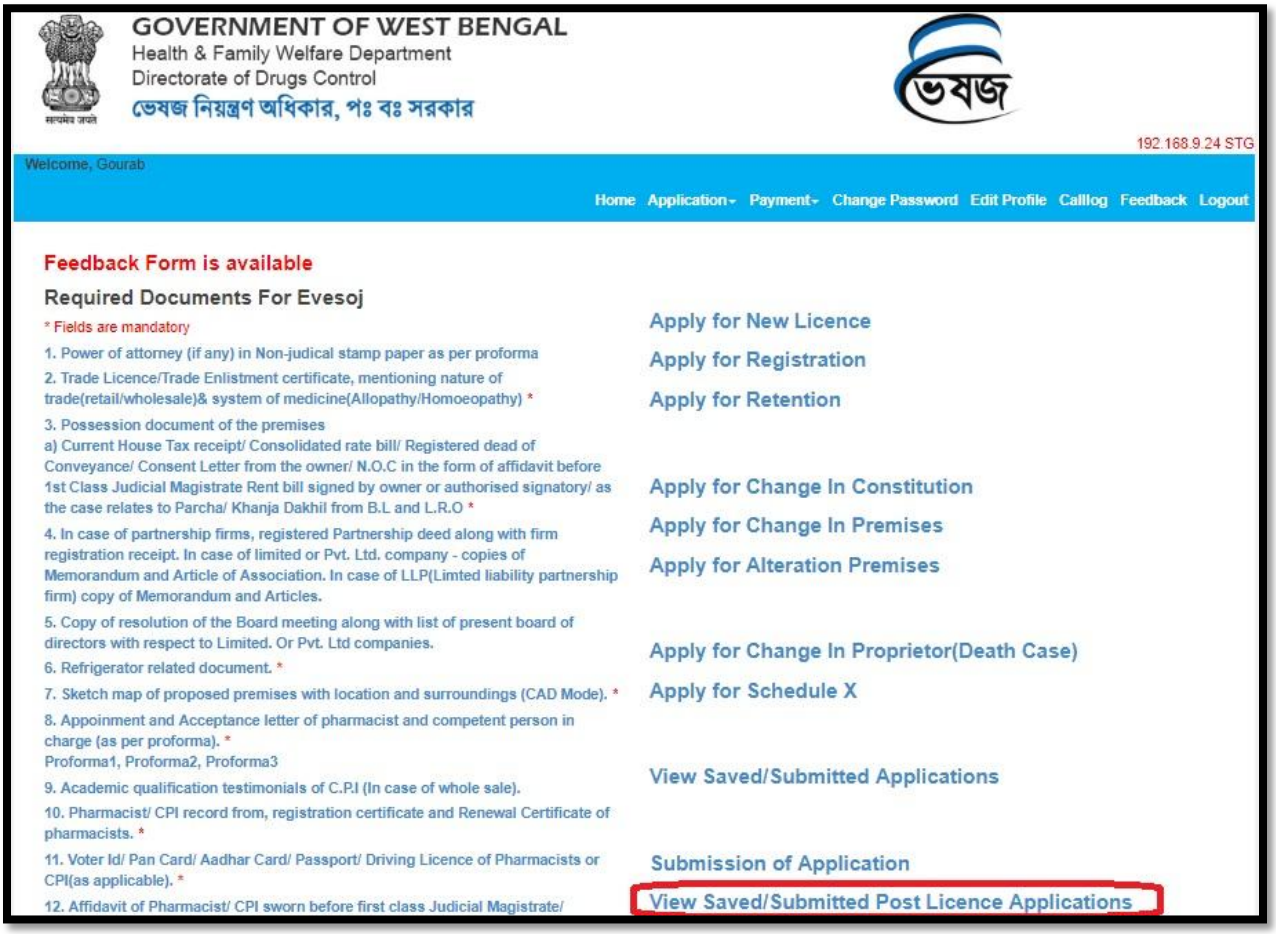
29.2 Detailed Steps

- It is to be noted that when the User submits the Post License Application it is forwarded to License Authority (LA).
- Now LA can do a number of things with the submitted applications like 'Approve the application', 'Reject the application', 'send the application back to User to Edit Documents', 'send the application back to User to Edit Pharmacy' and 'Show cause the User if required'.
- If the LA 'Approves' the application the User will receive a SMS that "*Your post licensing application (Form No: PL-4) has been approved*".
- If the LA 'Rejects' the application the User will receive a SMS that "*Your post licensing application (Form No: PL-8) has been rejected due to following reasons: …….*"
- If the LA wants the User to 'Edit Documents' the User will receive a SMS that "*You are allowed to edit document in your post licensing application (Form No: PL-1).Please go to edit document option*" .
- On receiving the SMS the User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen.
- Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them.
- On clicking this 'Action' button the user will view a list of options in which the first is 'Edit Document'.
- On clicking 'Edit Document' an 'OTP' will be generated and sent to User's mobile number and he/she will be redirected to a new screen where he/she will upload new document, add remarks and enter the OTP sent to his/her mobile number and finally click on 'Submit' button upon which the submitted documents will be forwarded to LA.
- If LA 'Show causes' the User the User will receive a SMS that "*Your License has been Show caused, Please check your application for details*".
- On receiving the SMS the User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen. Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them.
- On clicking this 'Action' button the user will view a list of options in which there are two options 'Show caused Documents' and 'Show cause reply'. The user will click on 'Show caused Documents' to download the document that has been show caused by the LA.
- The User clicks on 'Show cause reply' an 'OTP' will be generated and sent to User's mobile number and he/she will be redirected to a new screen where he/she will upload new document, add 'Reasons' and enter the OTP sent to his/her mobile number and finally click on 'Submit' button upon which the submitted documents will be forwarded to LA.
- After the User has replied for the show cause the LA if not satisfied with the reply can summon the User for Hearing. Also if the LA does not respond to the User's reply within 15 days from user's reply the User will be automatically summoned for hearing.

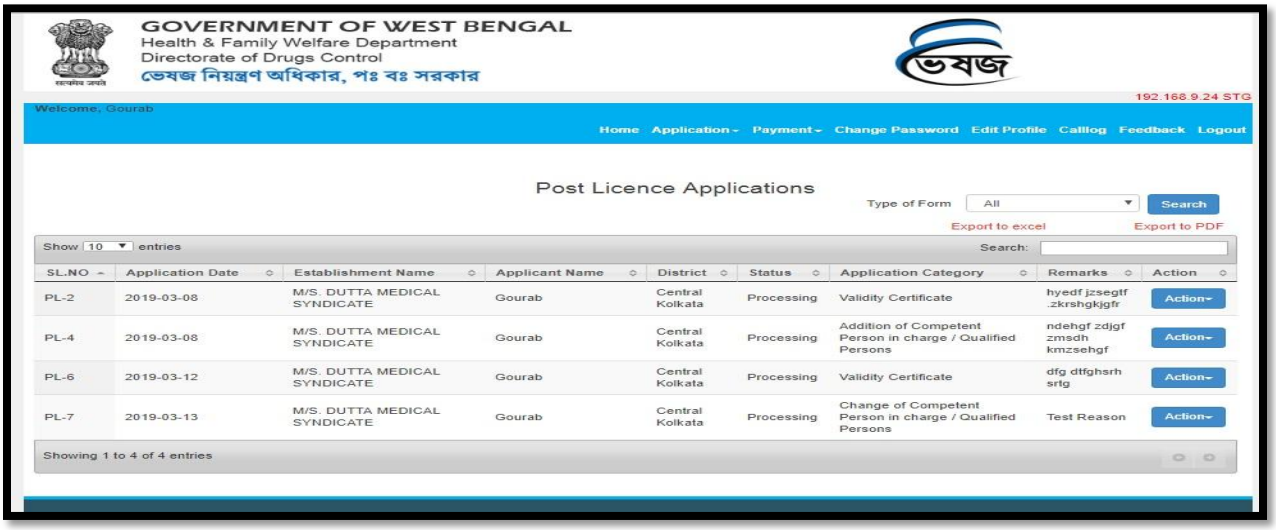
- It is to be noted that all the above procedures discussed will be followed in case of 'Validity Certificate', 'No Conviction Certificate', 'Surrendering License', and also for 'Addition of Competent Person in charge / Qualified Persons (Adding Pharmacist)' and 'Change of Competent Person in charge / Qualified Persons (Editing Pharmacist)'. It is to note here that the LA can send for Inspection for later two cases.
- If the LA want the User to Edit Pharmacist details then a SMS will be sent to the user stating "*You are allowed to edit pharmacist details in your post licensing application (Form No : PL-1).Please go to edit pharmacist details option*".
- On receiving the SMS the User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen. Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them.
- On clicking this 'Action' button the user will view a list of options in which there is an option 'Edit Pharmacist Details'.
- On clicking 'Edit Pharmacist Details' the User will be navigated to Registered Pharmacist Details page where the User enters name, qualification, other qualification, age, experience and registration number and finally clicks on submit to save the changes.
- The LA can send for inspection if he wants after user has added or edited pharmacist details. In this case the user will get a SMS stating, "LA has sent your post licensing application (Form No: $) to IA for Inspection".

29.3 Screenshot View

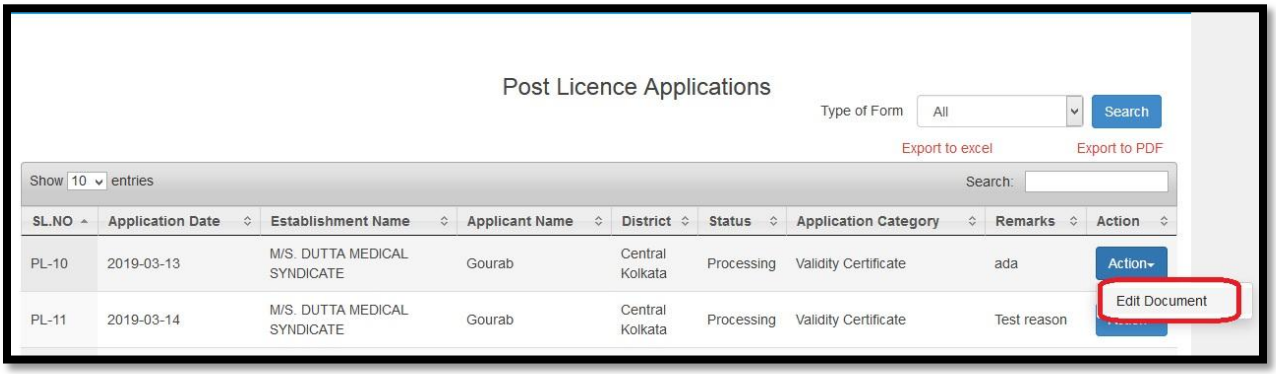
User will click on 'View Saved/Submitted Applications' on the home page and will redirected to the Post License applications screen.



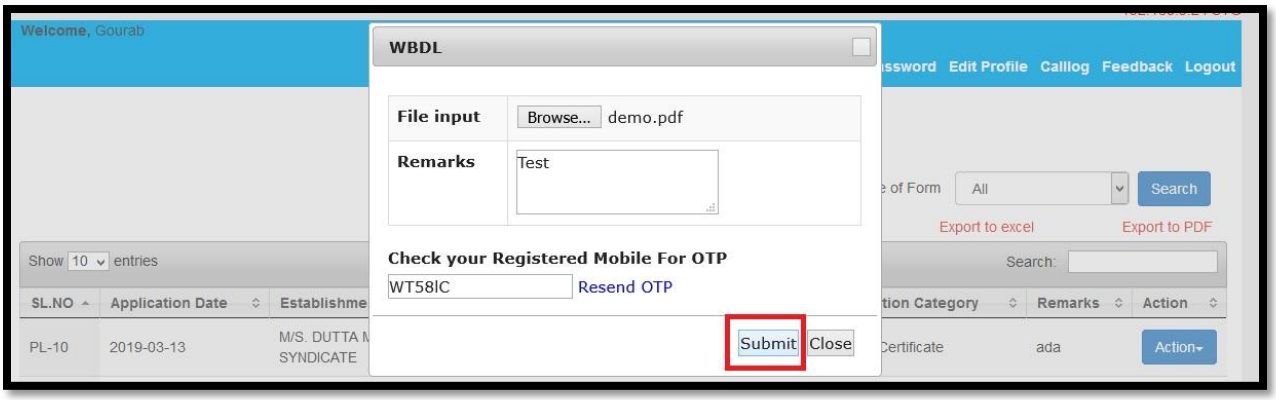
Over here the User sees a list of Post License applications and an 'Action' button adjacent to each of them.



On clicking this 'Action' button the user will view a list of options in which the first is 'Edit Document'.

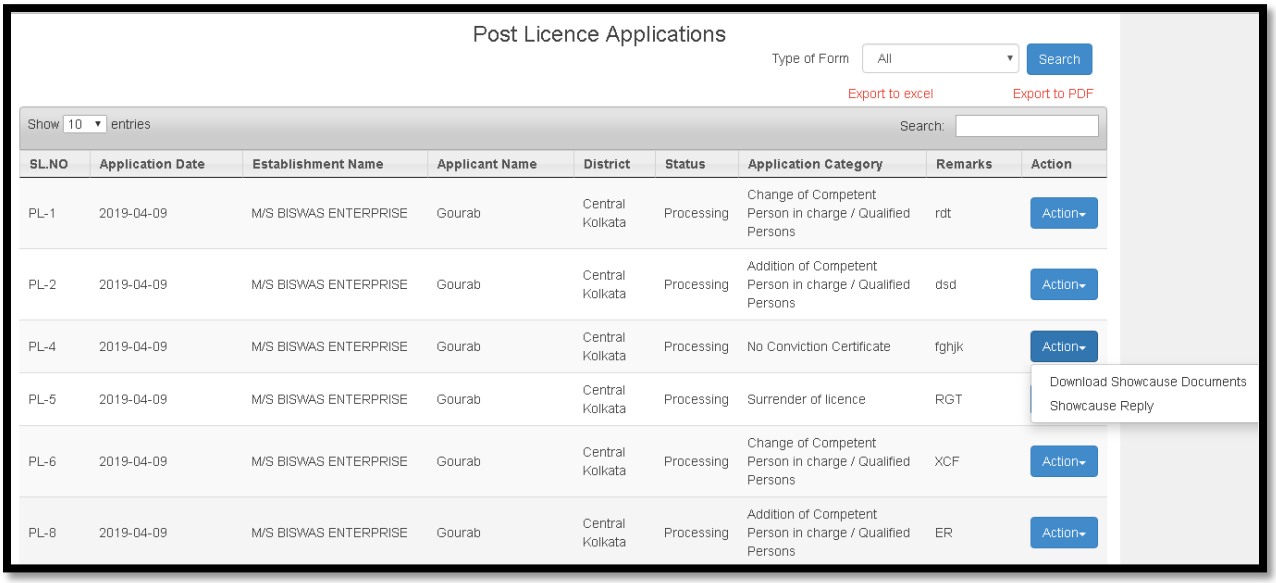


On clicking 'Edit Document' an 'OTP' will be generated and sent to User's mobile number and he/she will be redirected to a new screen where he/she will upload new document, add remarks and enter the OTP sent to his/her mobile number and finally click on 'Submit' button upon which the submitted documents will be forwarded to LA.

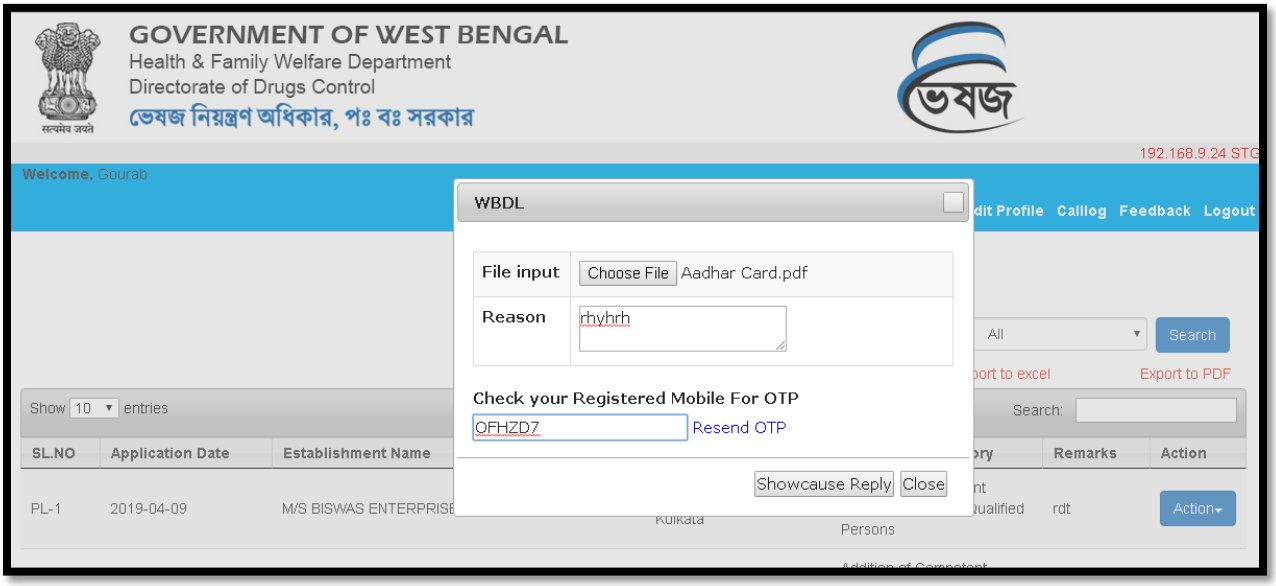


On clicking the 'Action' button the user will view a list of options in which there are two options 'Show caused Documents' and 'Show cause reply'. The user will click on 'Show caused

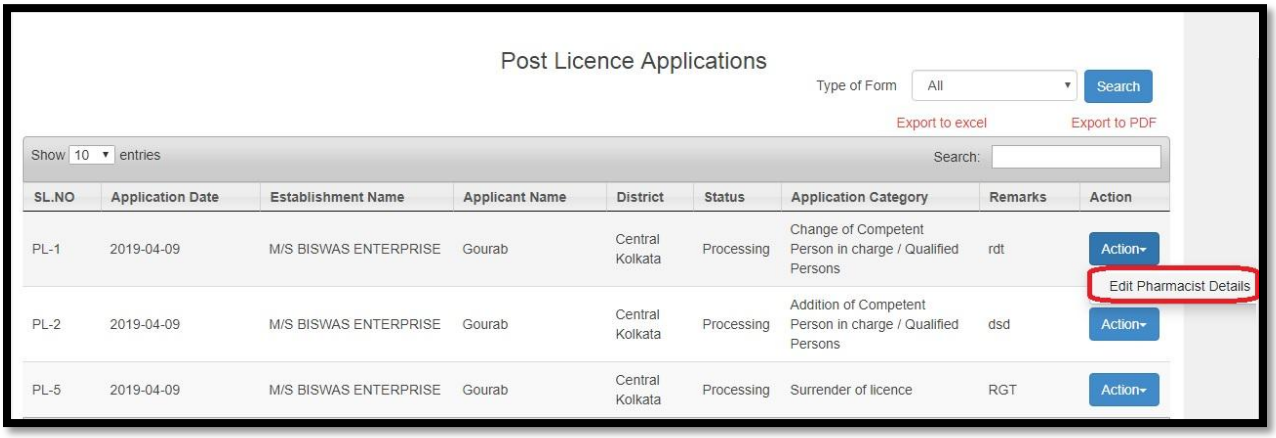
Documents' to download the document that has been show caused by the LA.



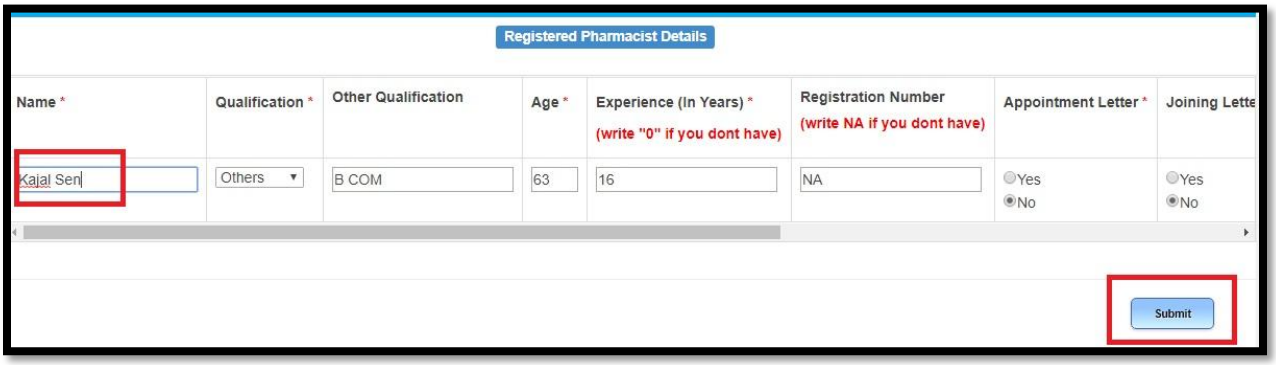
The User clicks on 'Show cause reply' an 'OTP' will be generated and sent to User's mobile number and he/she will be redirected to a new screen where he/she will upload new document, add 'Reasons' and enter the OTP sent to his/her mobile number and finally click on 'Submit' button upon which the submitted documents will be forwarded to LA.



On clicking the 'Action' button the user will view a list of options in which there is an option 'Edit Pharmacist Details'.



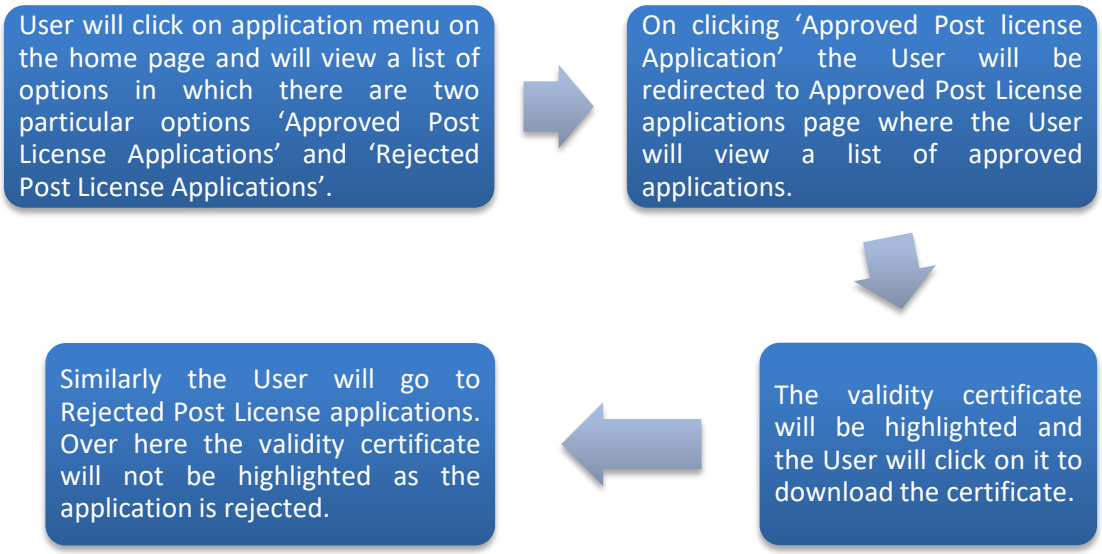
On clicking 'Edit Pharmacist Details' the User will be navigated to Registered Pharmacist Details page where the User enters name, qualification, other qualification, age, experience and registration number and finally clicks on submit to save the changes.



30 Approved and Rejected Post License Applications

User will click on application menu on the home page and will view a list of options in which there are two particular options 'Approved Post License Applications' and 'Rejected Post License Applications'. On clicking 'Approved Post license Application' the User will be redirected to Approved Post License applications page where the User will view a list of approved applications. The validity certificate will be highlighted and the User will click on it to download the certificate. Similarly the User will go to Rejected Post License applications. Over here the validity certificate will not be highlighted as the application is rejected.

30.1 Process Flow

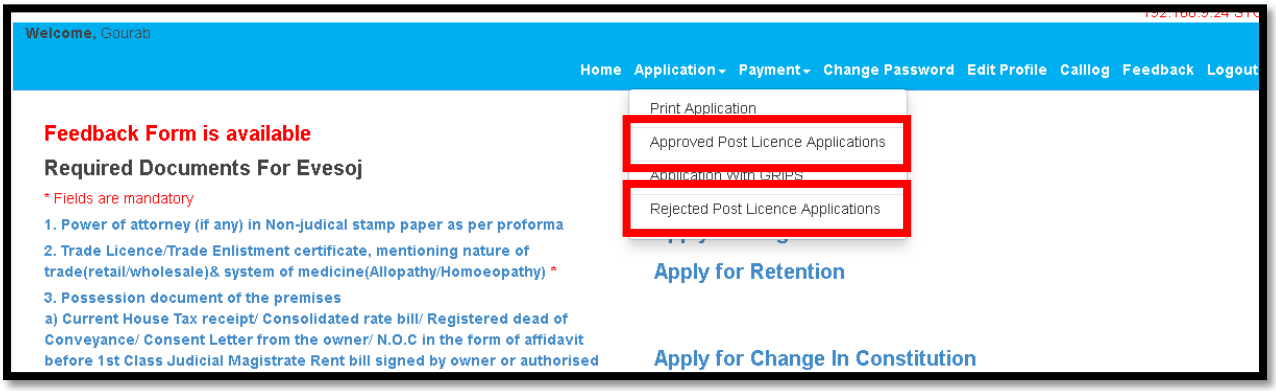


30.2 Detailed Steps

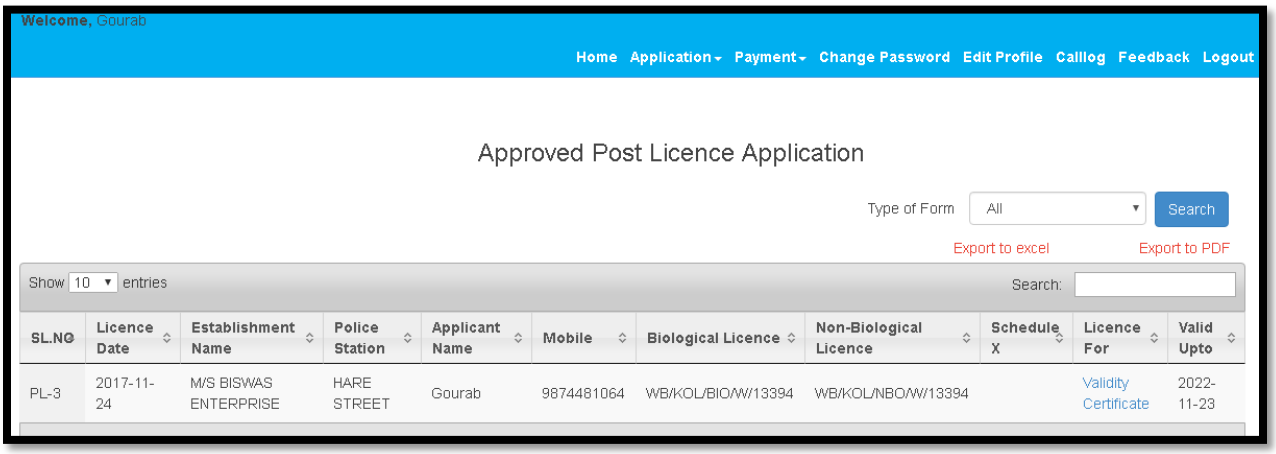
- User will click on application menu on the home page and will view a list of options in which there are two particular options 'Approved Post License Applications' and 'Rejected Post License Applications'.
- On clicking 'Approved Post license Application' the User will be redirected to Approved Post License applications page where the User will view a list of approved applications.
- The validity certificate will be highlighted and the User will click on it to download the certificate.
- Similarly the User will go to Rejected Post License applications. Over here the validity certificate will not be highlighted as the application is rejected.

30.3 Screenshot View

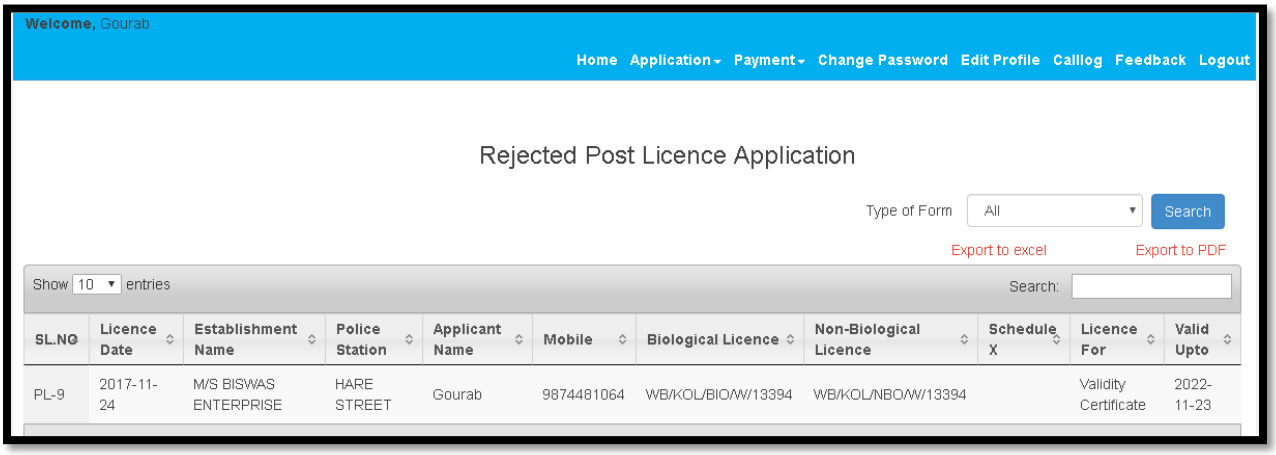
User will click on application menu on the home page and will view a list of options in which there are two particular options 'Approved Post License Applications' and 'Rejected Post License Applications'.



On clicking ‘Approved Post license Application’ the User will be redirected to Approved Post License applications page where the User will view a list of approved applications.
The validity certificate & No Conviction certificate will be highlighted and the User will click on it to download the certificate.



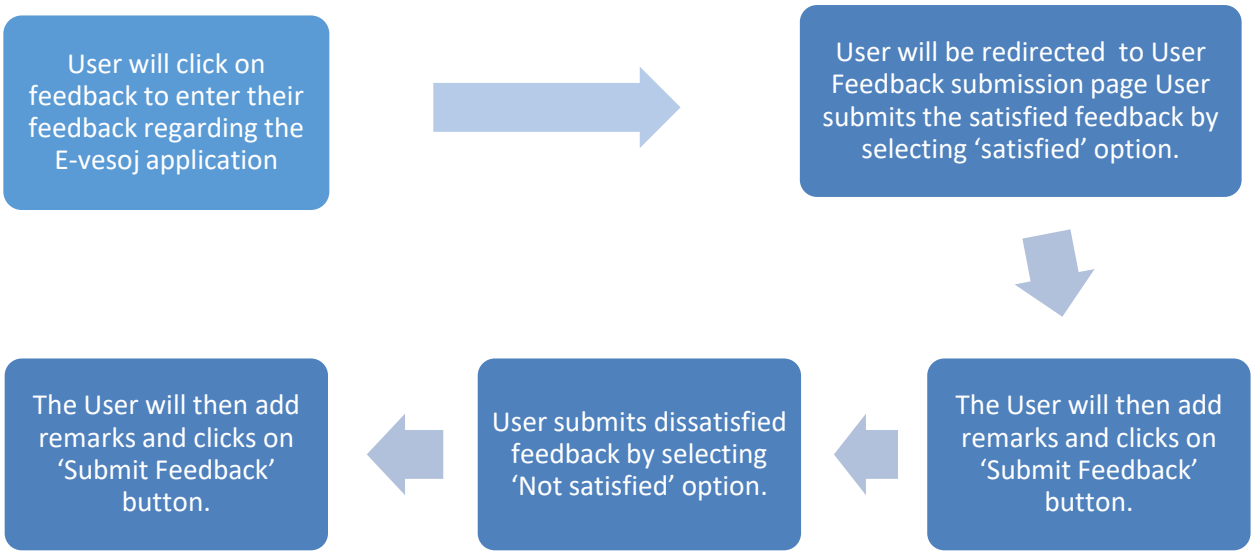
Similarly the User will go to Rejected Post License applications. Over here the validity certificate will not be highlighted as the application is rejected.



31 Feedback

User will click on feedback to enter their feedback regarding the E-vesoj application. User will be redirected to User Feedback submission page User submits the satisfied feedback by selecting 'satisfied' option. The User will then add remarks and clicks on 'Submit Feedback' button. User submits dissatisfied feedback by selecting 'Not satisfied' option. The User will then add remarks and clicks on 'Submit Feedback' button.

31.1 Process Flow

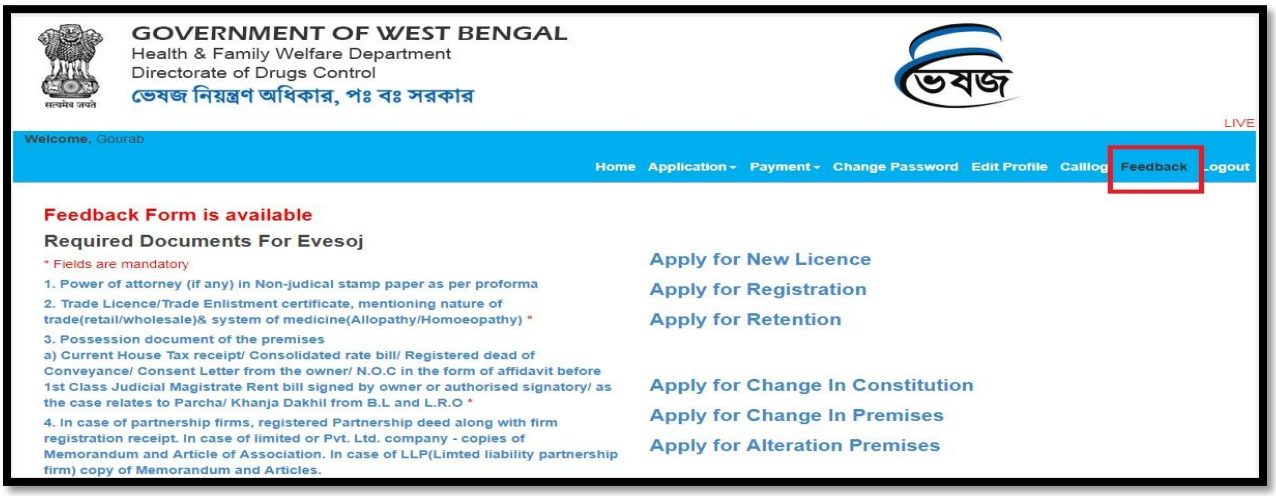


31.2 Detailed Steps

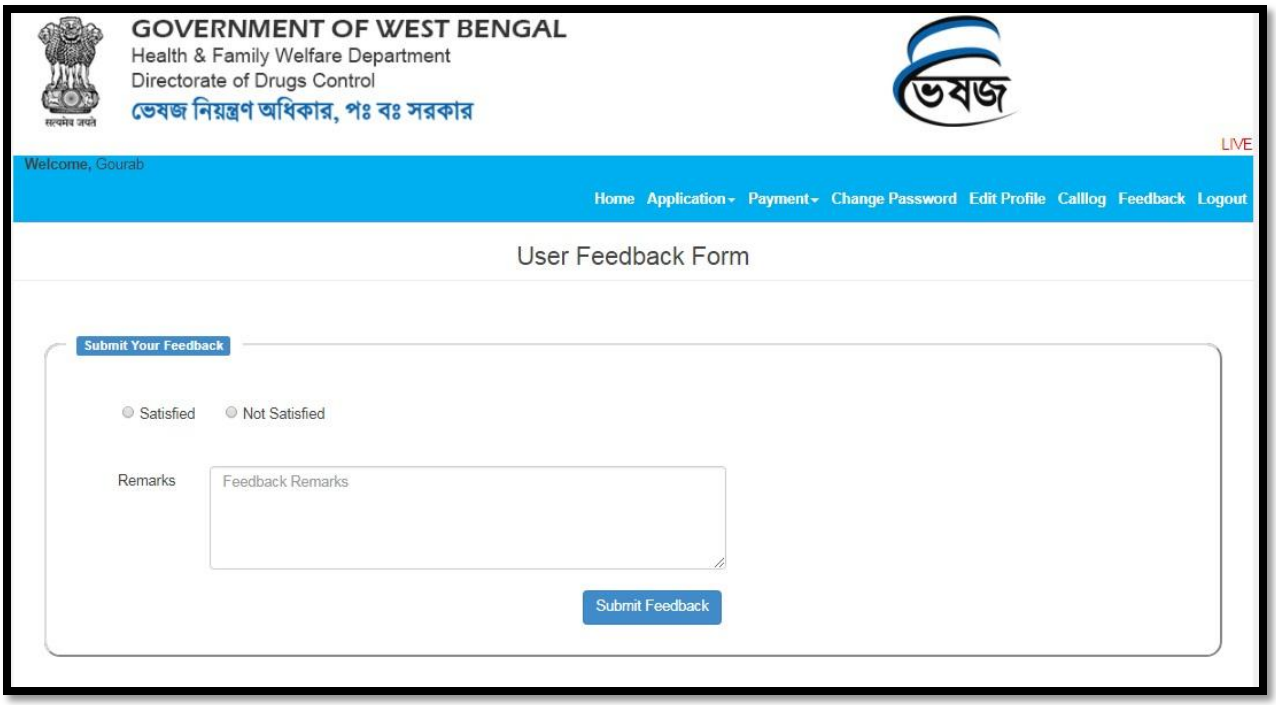
- User will click on feedback to enter their feedback regarding the E-vesoj application
- User will be redirected to User Feedback submission page User submits the satisfied feedback by selecting 'satisfied' option.
- The User will then add remarks and clicks on 'Submit Feedback' button.
- User submits dissatisfied feedback by selecting 'Not satisfied' option.
- The User will then add remarks and clicks on 'Submit Feedback' button.

31.3 Screenshot View

User will click on feedback to enter their feedback regarding the E-vesoj application

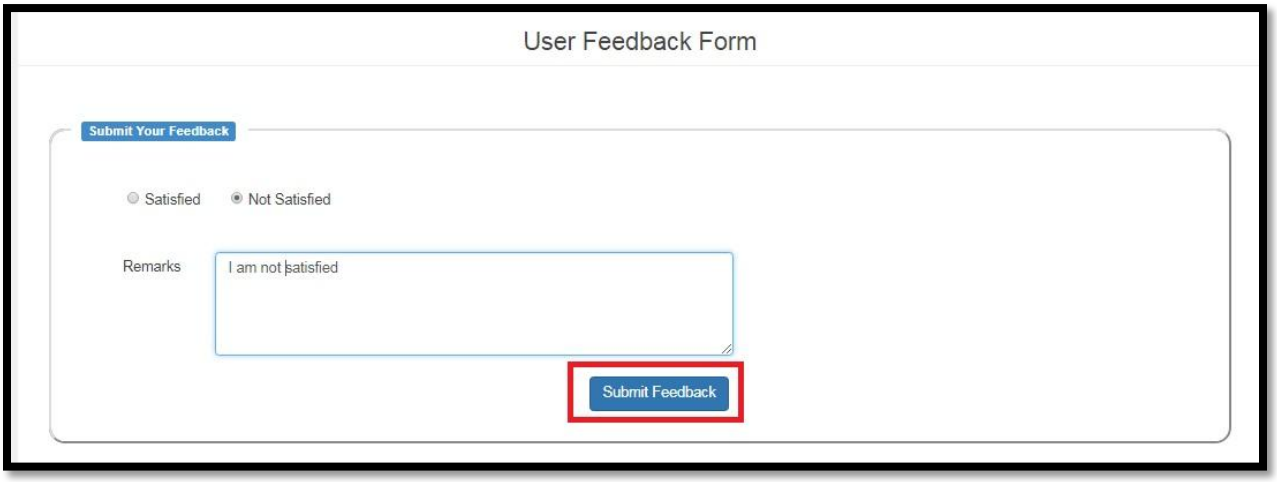


User will be redirect to the User Feedback submission page



User submits the satisfied feedback by selecting ‘satisfied’ option. The User will then add remarks and clicks on ‘Submit Feedback’ button.

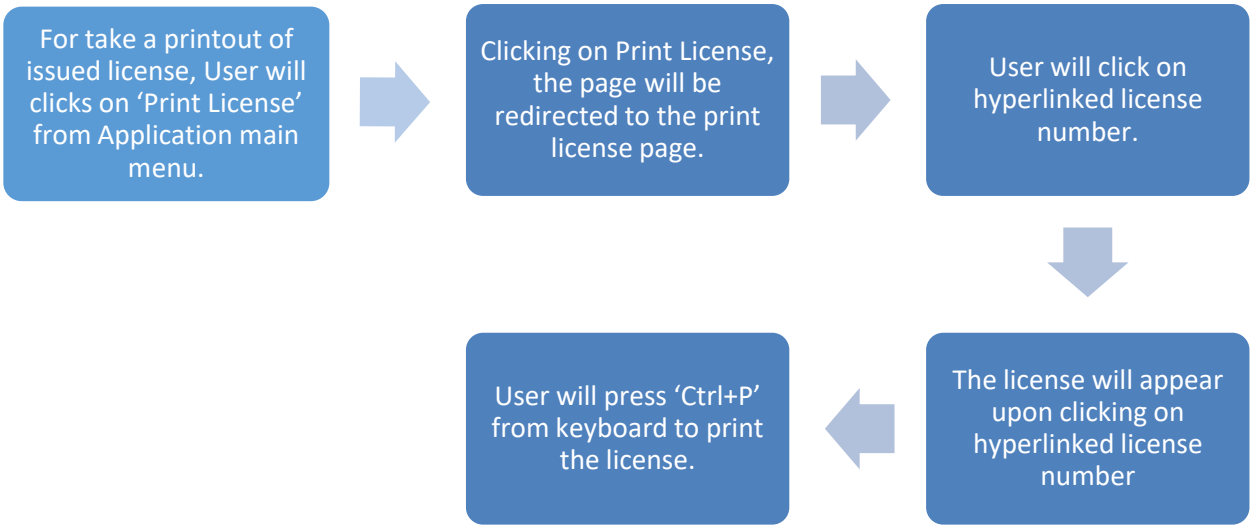
User submits dissatisfied feedback by selecting ‘Not satisfied’ option. The User will then add remarks and clicks on ‘Submit Feedback’ button.



32 Download License

After Licensing Authority issues drug license it's automatically stores in User profile. User can take printout of the same but the license will be unsigned from licensing authority. Detailed procedure mentioned in 26.2.

32.1 Process Flow

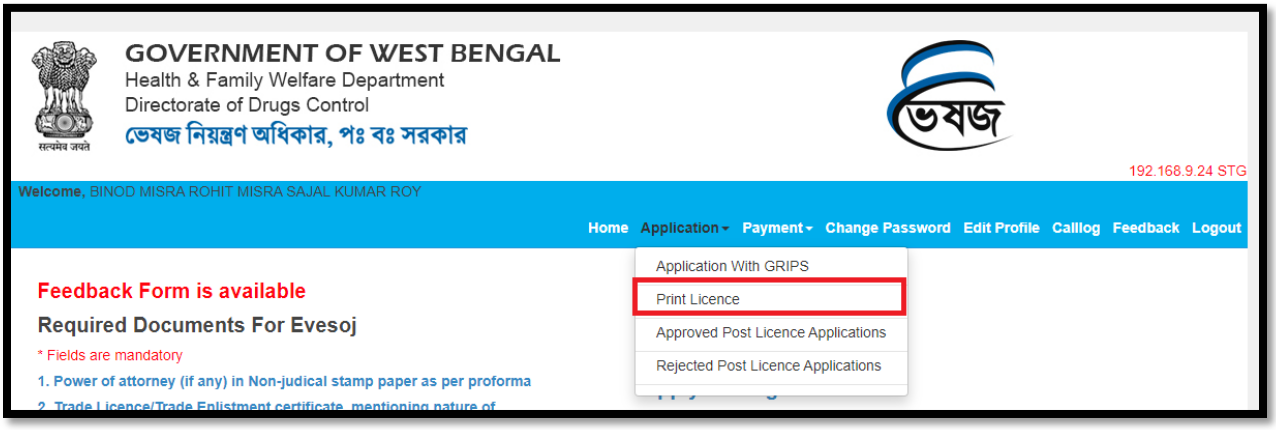


32.2 Detailed Steps

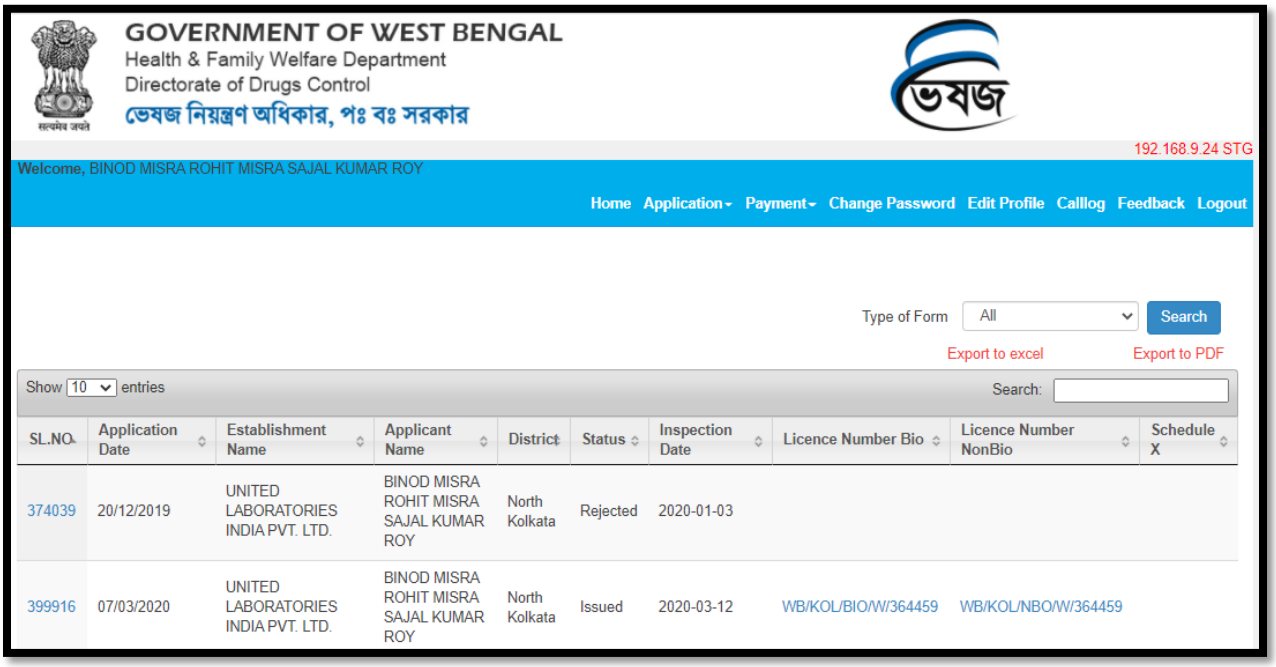
- For take a printout of issued license, User will clicks on 'Print License' from Application main menu.
- Clicking on Print License, the page will be redirected to the print license page.
- User will click on hyperlinked license number.
- The license will appear upon clicking on hyperlinked license number
- User will press 'Ctrl+P' from keyboard to print the license.

21.1 Screenshot View

For take a printout of issued license, User will clicks on ‘Print License’ from Application main menu.

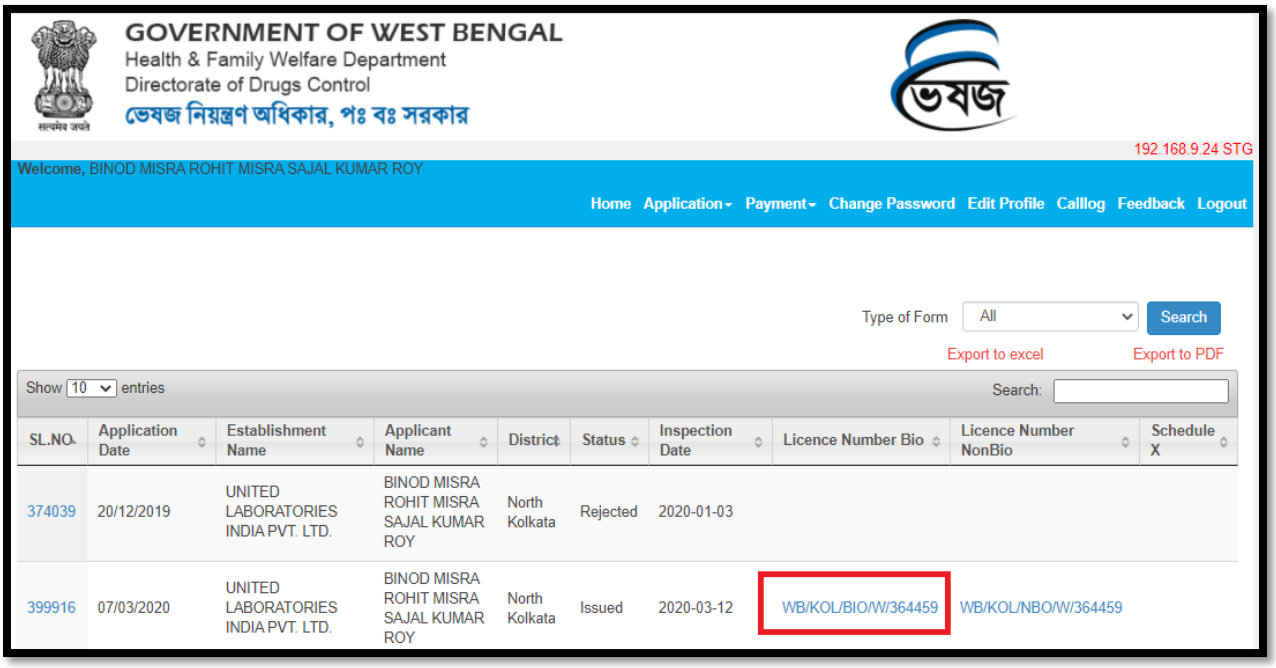


Clicking on Print License, the page will be redirected to the print license page.



SL.NO.	Application Date	Establishment Name	Applicant Name	District	Status	Inspection Date	Licence Number Bio	Licence Number NonBio	Schedule X
374039	20/12/2019	UNITED LABORATORIES INDIA PVT. LTD.	BINOD MISRA ROHIT MISRA SAJAL KUMAR ROY	North Kolkata	Rejected	2020-01-03			
399916	07/03/2020	UNITED LABORATORIES INDIA PVT. LTD.	BINOD MISRA ROHIT MISRA SAJAL KUMAR ROY	North Kolkata	Issued	2020-03-12	WB/KOL/BIO/W/364459	WB/KOL/NBO/W/364459	

User will click on hyperlinked license number.



GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

192.168.9.24 STG

Welcome, BINOD MISRA ROHIT MISRA SAJAL KUMAR ROY

Home Application Payment Change Password Edit Profile Calllog Feedback Logout

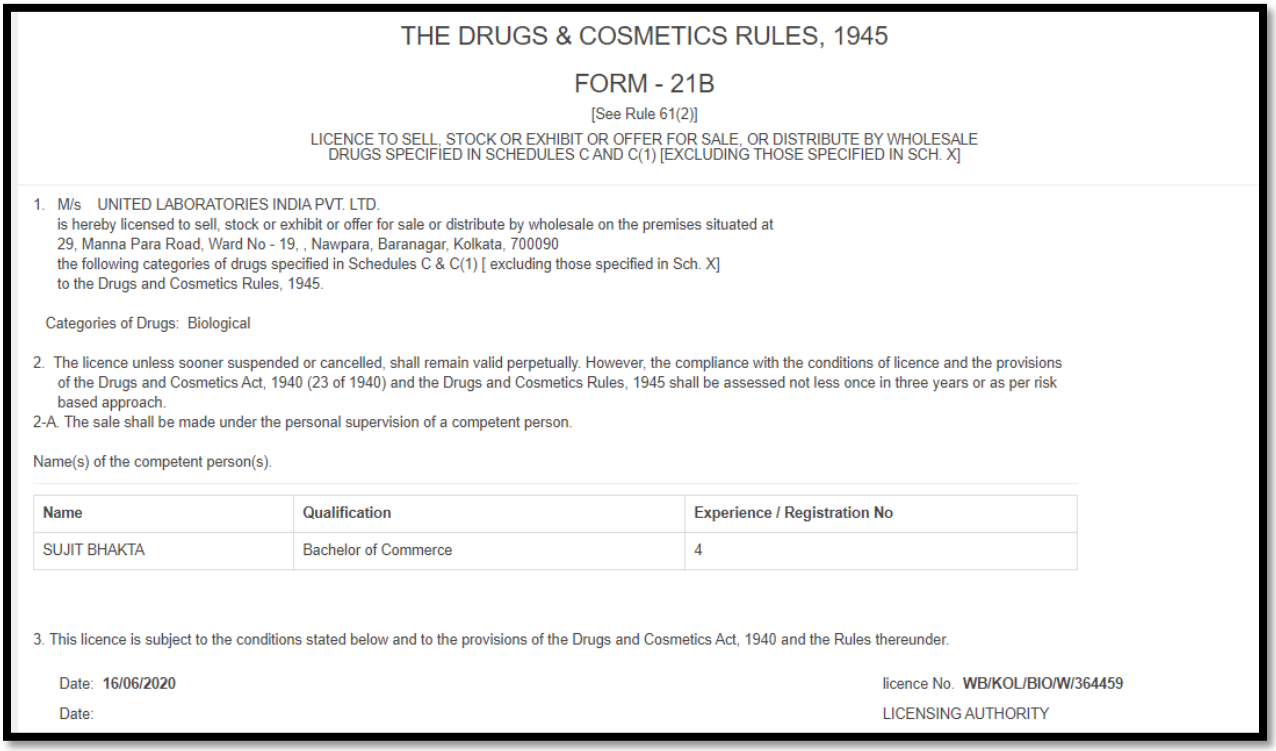
Type of Form All Search

Export to excel Export to PDF

Show 10 entries Search:

SL.NO.	Application Date	Establishment Name	Applicant Name	District	Status	Inspection Date	Licence Number Bio	Licence Number NonBio	Schedule X
374039	20/12/2019	UNITED LABORATORIES INDIA PVT. LTD.	BINOD MISRA ROHIT MISRA SAJAL KUMAR ROY	North Kolkata	Rejected	2020-01-03			
399916	07/03/2020	UNITED LABORATORIES INDIA PVT. LTD.	BINOD MISRA ROHIT MISRA SAJAL KUMAR ROY	North Kolkata	Issued	2020-03-12	WB/KOL/BIO/W/364459	WB/KOL/NBO/W/364459	

The license will appear upon clicking on hyperlinked license number.



THE DRUGS & COSMETICS RULES, 1945

FORM - 21B

[See Rule 61(2)]

LICENCE TO SELL, STOCK OR EXHIBIT OR OFFER FOR SALE, OR DISTRIBUTE BY WHOLESALE DRUGS SPECIFIED IN SCHEDULES C AND C(1) [EXCLUDING THOSE SPECIFIED IN SCH. X]

1. M/s UNITED LABORATORIES INDIA PVT. LTD.
is hereby licensed to sell, stock or exhibit or offer for sale or distribute by wholesale on the premises situated at
29, Manna Para Road, Ward No - 19, , Nawpara, Baranagar, Kolkata, 700090
the following categories of drugs specified in Schedules C & C(1) [excluding those specified in Sch. X]
to the Drugs and Cosmetics Rules, 1945.

Categories of Drugs: Biological

2. The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics Act, 1940 (23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less once in three years or as per risk based approach.

2-A. The sale shall be made under the personal supervision of a competent person.

Name(s) of the competent person(s).

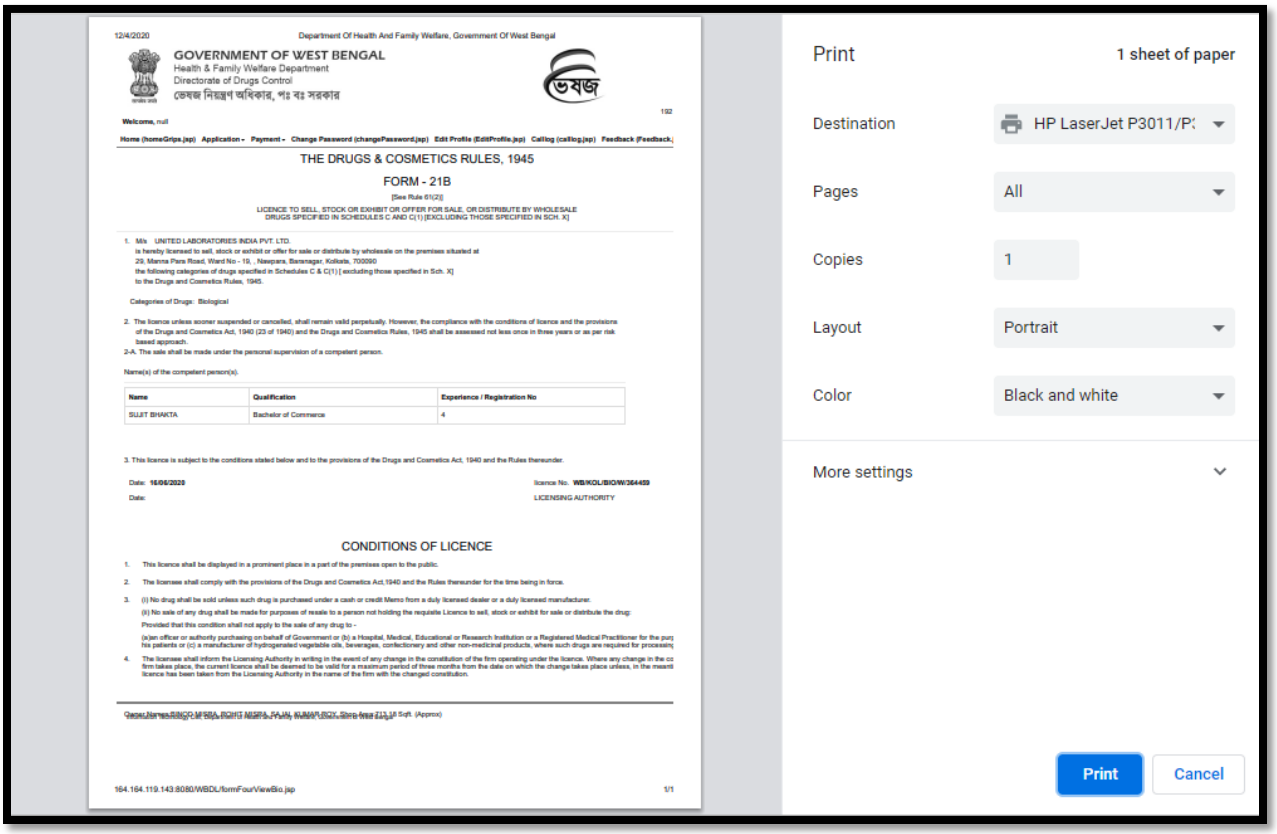
Name	Qualification	Experience / Registration No
SUJIT BHAKTA	Bachelor of Commerce	4

3. This licence is subject to the conditions stated below and to the provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.

Date: 16/06/2020 licence No. WB/KOL/BIO/W/364459

Date: LICENSING AUTHORITY

User will press ‘Ctrl+P’ from keyboard to print the license.



12/4/2020 Department Of Health And Family Welfare, Government Of West Bengal

GOVERNMENT OF WEST BENGAL
Health & Family Welfare Department
Directorate of Drugs Control
ভেষজ নিয়ন্ত্রণ অধিকার, পঃ বঃ সরকার

ভেষজ

1/2

Welcome, null

Home (homeGrips.jsp) Application - Payment - Change Password (changePassword.jsp) Edit Profile (EditProfile.jsp) Calling (calling.jsp) Feedback (Feedback.

THE DRUGS & COSMETICS RULES, 1945

FORM - 21B

[See Rule 61(2)]

LICENCE TO SELL, STOCK OR EXHIBIT OR OFFER FOR SALE, OR DISTRIBUTE BY WHOLESALE DRUGS SPECIFIED IN SCHEDULES C AND C(1) [EXCLUDING THOSE SPECIFIED IN SCH. X]

1. M/s UNITED LABORATORIES INDIA PVT. LTD.
is hereby licensed to sell, stock or exhibit or offer for sale or distribute by wholesale on the premises situated at
29, Manna Para Road, Ward No - 19, , Nawpara, Baranagar, Kolkata, 700090
the following categories of drugs specified in Schedules C & C(1) [excluding those specified in Sch. X]
to the Drugs and Cosmetics Rules, 1945.

Categories of Drugs : Biological

2. The licence unless sooner suspended or cancelled, shall remain valid perpetually. However, the compliance with the conditions of licence and the provisions of the Drugs and Cosmetics Act, 1940 (23 of 1940) and the Drugs and Cosmetics Rules, 1945 shall be assessed not less once in three years or as per risk based approach.

2-A. The sale shall be made under the personal supervision of a competent person.

Name(s) of the competent person(s).

Name	Qualification	Experience / Registration No
SUJIT BHAKTA	Bachelor of Commerce	4

3. This licence is subject to the conditions stated below and to the provisions of the Drugs and Cosmetics Act, 1940 and the Rules thereunder.

Date: 16/06/2020 Licence No. WB/KOL/BIO/W/364459

Date: LICENSING AUTHORITY

CONDITIONS OF LICENCE

1. This licence shall be displayed in a prominent place in a part of the premises open to the public.
2. The licensee shall comply with the provisions of the Drugs and Cosmetics Act,1940 and the Rules thereunder for the time being in force.
3. (i) No drug shall be sold unless such drug is purchased under a cash or credit Memo from a duly licensed dealer or a duly licensed manufacturer.
(ii) No sale of any drug shall be made for purposes of resale to a person not holding the requisite Licence to sell, stock or exhibit for sale or distribute the drug:
Provided that this condition shall not apply to the sale of any drug to -
(a)an officer or authority purchasing on behalf of Government or (b) a Hospital, Medical, Educational or Research Institution or a Registered Medical Practitioner for the purp his patients or (c) a manufacturer of hydrogenated vegetable oils, Beverages, confectionery and other non-medicinal products, where such drugs are required for processing
4. The licensee shall inform the Licensing Authority in writing in the event of any change in the constitution of the firm operating under the licence. Where any change in the co firm takes place, the current licence shall be deemed to be valid for a maximum period of three months from the date on which the change takes place unless, in the meanti licence has been taken from the Licensing Authority in the name of the firm with the changed constitution.

164.164.119.143:8080/WBDL/formFourViewBio.jsp 1/1

Print 1 sheet of paper

Destination HP LaserJet P3011/P

Pages All

Copies 1

Layout Portrait

Color Black and white

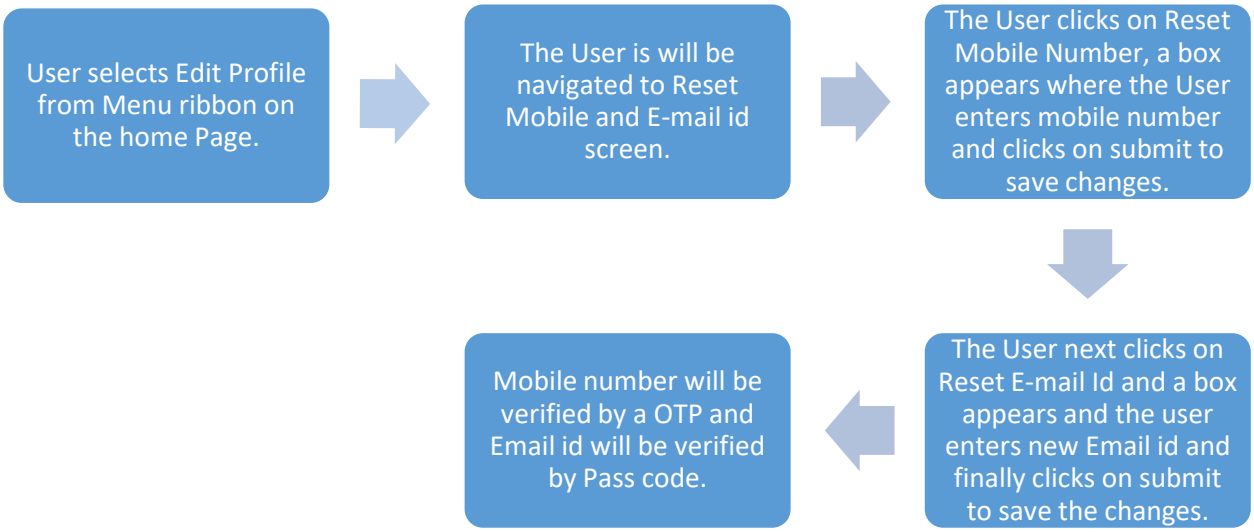
More settings

Print Cancel

33 Edit Profile

User selects Edit Profile from Menu ribbon on the home Page. The User is will be navigated to Reset Mobile and E-mail id screen. The User clicks on Reset Mobile Number, a box appears where the User enters mobile number and clicks on submit to save changes. The User next clicks on Reset E-mail Id and a box appears and the user enters new Email id and finally clicks on submit to save the changes. Mobile number will be verified by a OTP and Email id will be verified by Pass code.

33.1 Process Flow



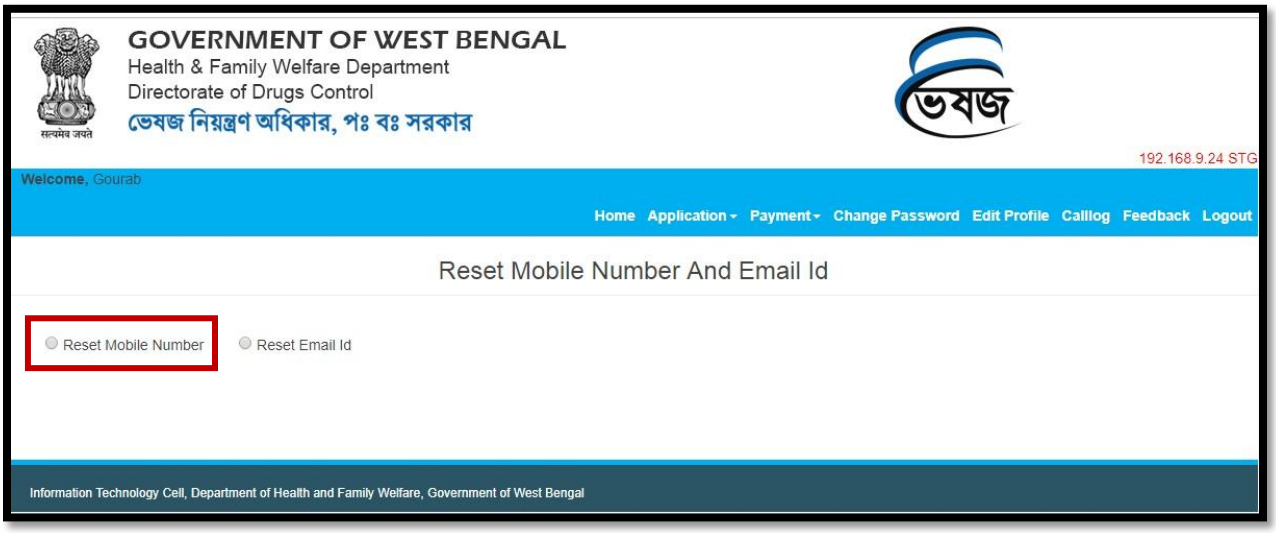
33.2 Detailed Steps

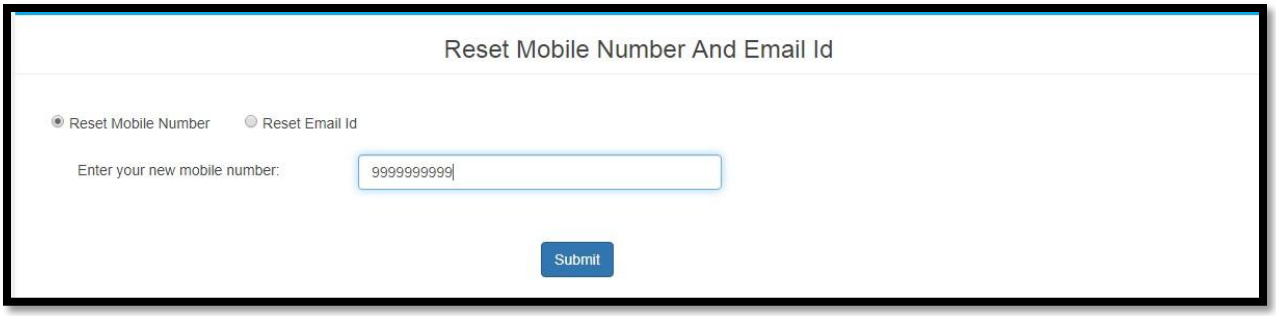
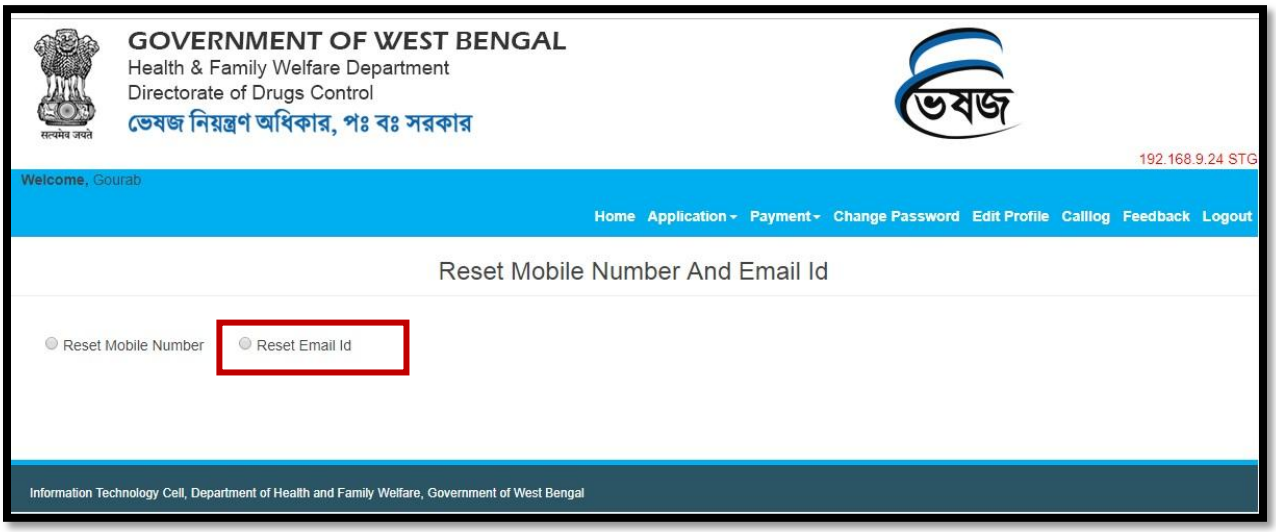
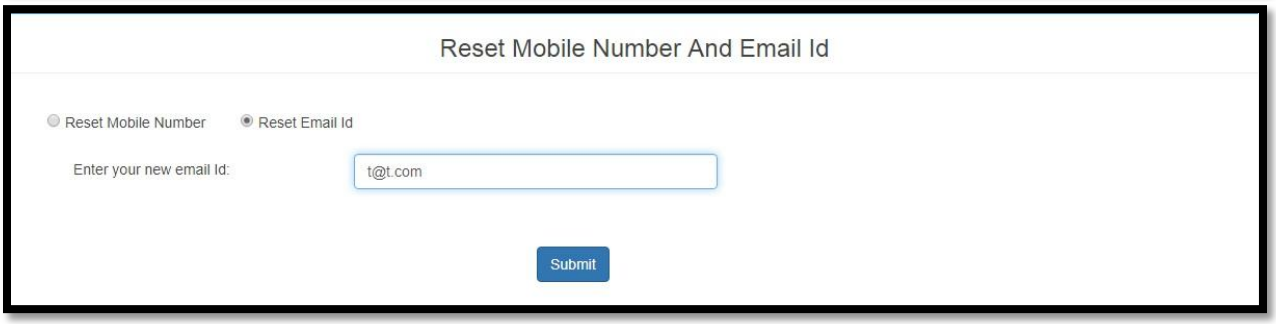
- User selects Edit Profile from Menu ribbon on the home Page.
- The User is will be navigated to Reset Mobile and E-mail id screen.
- The User clicks on Reset Mobile Number, a box appears where the User enters mobile number and clicks on submit to save changes.
- The User next clicks on Reset E-mail Id and a box appears and the user enters new Email id and finally clicks on submit to save the changes.
- Mobile number will be verified by a OTP and Email id will be verified by Pass code.

33.3 Screenshot View

User selects Edit Profile from Menu ribbon on the home Page.

The User is will be navigated to Reset Mobile and E-mail id screen. The User clicks on Reset Mobile Number, a box appears where the User enters mobile number and clicks on submit to save changes. Mobile number will be verified by a OTP.





The User next clicks on Reset E-mail Id and a box appears and the user enters new Email id and finally clicks on submit to save the changes. Email id will be verified by Pass code.