**ANKARA**

**…….../………/2……**

**MANUFACTURING LICENCE**

 We hereby certify that*………………………………………….(company name)…………* located at *……………….(address)………………………………………………………*is registered in Turkish Medicines and Medical Devices Agency for the manufacturing of…………………… ……………………………………………………………………………………………...………………………………..(*dosage forms/active substances)*………………………………..… ………………………………………………………………………………………………...…………………………………………………………………………………………………….. with the number…………*(authorization number)*….. dated….. *(authorization date)* ……

 What I hereby certify on request of those concerned in the date and place above referenced.

Certificate No:

Name, surname and signature of Authorized Person

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 This certificate is valid until.....................