



IRISH MEDICINES BOARD

# Precursor Chemicals

## Licensing, Registration & Authorisation

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Camden Court Hotel, May 24<sup>th</sup> 2010

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Senior Controlled Drugs Licensing Officer  
IMB

## Scheduled Substance: External Trade Requirements

	Category 1	Category 2	Category 3
Licence	Importer Exporter Intermediary Role	Not Required	
Registration	Not Required	Importer Exporter Intermediary Role	Export above thresholds
Importation Authorisation	Required per transaction	Not Required	
Exportation Authorisation	Required per transaction		Required for transactions to Sensitive Countries
Pre-export Notification	Required per transaction	Required for transactions to Sensitive Countries	

## Scheduled Substance: Internal Trade Requirements

	Category 1	Category 2	Category 3
Licence	Possession Placing on the market	Not Required	
Registration	Not Required	Placing on the market	Not Required
Customer Declaration	Required per transaction	Not Required	
Exportation Authorisation	Required to be provided to the supplier		Not Required



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# Model declaration relating to individual transactions (category 1 or 2)

## ANNEX III

### I. Model declaration relating to individual transactions (category 1 or 2)

CUSTOMER DECLARATION OF SPECIFIC USE(S) OF THE SCHEDULED CATEGORY 1 OR 2 SUBSTANCE  
(individual transactions)

I/We,  
Name: .....

Address: .....

Reference number of authorization/licence/registration:  
(delete as appropriate) .....

issued on: ..... by .....  
(name and address of the authority)

and without time limit/valid until .....  
(delete as appropriate)

have on our stock:  
Name: .....

Address: .....

the following substance  
Description: .....

Combined nomenclature (CN) code: ..... Quantity: .....

The substance will be used solely for .....

I/We hereby certify that the substance referred to above will not be re-sold or otherwise supplied to any other customer unless the latter furnishes a declaration of use in accordance with this model or, for category 2 substances, a declaration relating to multiple transactions.

Signature: ..... Name: .....  
(in block capitals)

Position: ..... Date: .....



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