

**TO BE COPIED AND PASTED ON YOUR COMPANY LETTERHEADED PAPER**

**CUSTOMER DECLARATION OF SPECIFIC USE(S) OF THE SCHEDULED  
CATEGORY 1 OR 2 SUBSTANCE (INDIVIDUAL TRANSACTIONS)**

**I, We,**

Name .....

Address .....

Authorisation/Licence/Registration No. or reference<sup>1</sup> .....

Issued on .....

by (name and address of authority) .....

.....

.....

and valid without expiry/until<sup>1</sup> .....

**have ordered from:**

COUNCIL OF EUROPE – EDQM  
7 allée Kastner  
67000 STRASBOURG

**the following substance** (tick the appropriate box - one item per form)

	<b>TARIC number</b>	<b>Quantity</b>
Ephedrine hydrochloride (racemic)	2939 41 00 00	.....
Ephedrine hydrochloride	2939 41 00 00	.....
Ergometrine maleate	2939 61 00 00	.....
Ergometrine (hydrogen) maleate	2939 61 00 00	.....
Ergotamine tartrate	2939 62 00 00	.....
Phenylpropanolamine hydrochloride (Norephedrine)	2939 44 00 00	.....
Pseudoephedrine hydrochloride	2939 42 00 00	.....
Phenylacetic acid (tropicamide imp. D)	2916 34 00 00	.....

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

We confirm that the substance referred to above will only be re-sold or otherwise supplied to a customer on the condition that the customer will furnish a similar declaration of use or, for category 2 substances, a declaration relating to multiple transactions.

Signed ..... Name (block capitals) .....

Position ..... Date .....

<sup>1</sup> Delete as appropriate