

NEW APPLICATION FOR LICENCE TO WHOLESALE CHINESE PROPRIETARY MEDICINES

Please note that companies must register with Client Registration and Identification Service (CRIS) and applicants must have valid CRIS user rights in order to be able to submit applications on behalf of the company via <u>apply@prism</u>. For more information on CRIS, please refer to <u>https://www.hsa.gov.sg/e-services/cris</u>

1. The online form may take an average of 10 minutes to fill in.

The time taken varies depending on the number and sizes of the file attachments, configurations of your computer and network, internet performance, etc. Please note that the time stated above excludes the time taken for preparatory work in relation to filling the online form (e.g. scanning documents for file attachments).

- 2. The following information/item(s) are required to complete the form:
 - (A) **Current layout plan for the premises,** specifying the storage area(s) (Mandatory) The layout floor plan will need to have the following information:
 - (i) The full address of the warehouse
 - (ii) The dimensions (length and width) of the warehouse
 - (iii) Indication of various storage areas, e.g. receiving bay, quarantined product area, released product area, rejected product area, returned product area, recalled product area, outgoing staging area, etc.
 - (B) Good Distribution Practice (GDP) Standard Operating Procedures
 - (C) Good Distribution Practice (GDP) Records or Recording Templates
- 3. The applicant will require a Corppass* or Singpass before he/she can login to PRISM to retrieve the application form. A person who drafts an application on behalf of his/her company and is not a Singaporean Citizen, Permanent Resident or Employment Pass holder can apply for a HSA PIN to login to PRISM. The Corppass* / Singpass or HSA PIN login is necessary for authentication and authorisation purposes.

***Note:** From 11 April 2021, the login process for Corppass has been changed to verify the user's identity via Singpass first before accessing and transacting with government digital services. While Singpass is used for logins, Corppass will continue to be the authorisation system for access to government digital services.

For more information on Corppass, please refer to http://www.corppass.gov.sg/

4. Mode of payment

Please note that there will be no refund of any payment made in relation to applications submitted through PRISM.

The mode of payment available is as follows:

- Non-GIRO: eNETS (Credit/Debit Card)
- GIRO (Preferred mode of payment)

Payment by GIRO requires pre-registration. The <u>GIRO application form</u> is required to be submitted by post to the HSA Finance Department. The correspondence address can be found in the application form. The registration process will take around 3 to 4 weeks after the submission of the application form.



Application Form

Fields marked with an asterisk * are mandatory.

Part 1. Licence Duration

The licence duration is 1 year. Click 'Next' button to proceed to Part 2. Company's Particulars section

Fields marked with an asterisk * are mandatory.	
1. Licence/Permit/Certificate/Listing Duration	
1.1 Duration of licence/permit/certificate/listing: * 1 Year ▼	
	Next Reset

Part 2. Company's Particulars

(1) Details such as **Name** of company and **Company Address** will be populated on screen based on the registered CRIS records.

If you need to make changes to this information, please submit the changes via the "<u>Amend Company</u> <u>Information</u>" module.

Input the information of Tel and/or Fax.

- (2) Indicate if the Billing Address is the same as Company Address.
- (3) If the Billing Address is not the same as Company Address, fill in the postal code and click on the Retrieve Address button. The Block/House No, Street Name and Building Name will be populated on screen. Fill in Level-Unit information if applicable. Fill in the other details.
- (4) Click 'Next' button to go to Part 3. Applicant Particulars section.

Fields marked with an asterisk * are mandatory.

		updated to the central client data	
	subsequent billing to the compa	ny. This will apply to all other lice	nces/applications of the company.
2. Company Particulars			
2.1 Name: *	Auto Populated		
2.2 Location Code:	1		
2.3 Company Address			
2.3.1 Address Type: *	Local		
2.3.2 Postal Code: *	Auto Populated		
2.3.3 Block / House No:	Auto Populated	2.3.4 Level - Unit:	Auto Populated
2.3.5 Street Name:	Auto Populated		
2.3.6 Building Name:	Auto Populated		
2.3.7 Country:	SINGAPORE		
2.4 Tel: *		2.5 Fax: Your Fax No. is necessary for our future correspondence	
2.6 Is Billing Address the sam	e as the Company Address? *	Yes	O No
2.8 Unique Entity No.(UEN):	Auto Populated		
			Previous Next Reset



Part 3. Applicant Particulars

This section allows the input of applicant particulars.

- (1) Fill in Name, ID No and Designation.
- (2) Fill in the Contact Details and Preferred Contact Mode.
- (3) Click 'Next' button to go to the Part 4. Warehouse Particulars section.

3. Applicant Particulars				
3.1 Name: *			(as in NRIC/FIN)	
3.2 NRIC/FIN: *		(Example: S1	234567A, F123456	i7A)
3.3 Designation: *				
3.4 Contact Details				
3.4.1 Tel: *		3.4.2 Fax:		
3.4.3 Handphone:		3.4.4 Pager:		
3.4.5 Email:				
3.5 Preferences				
3.5.1 Preferred Contact Mode: *	Email Fax SMS (Please ensure that the relevant contact details above is entered for your preferred contact mode. Please note that this preferred contact mode is the mode which you will receive the final notification of this application. During the course of this application, you will receive our input requests (i.e. queries), if any, via email if you have indicated your email address above, regardless of your selected preferred contact mode.)			
				Previous Next Reset

Part 4. Warehouse Particulars

This section allows the input of warehouse particulars.

Add warehouse(s)

- (1) Fill in the **Postal Code** and click '**Retrieve Address**' button. Details such as **Block/House No**, **Street Name** and **Building Name** will be populated.
- (2) Fill in the Level-Unit field and any additional detail relating to the warehouse in the Other Address Detail field (if applicable).
- (3) Fill in the Storage Condition of Warehouse.
- (4) Fill in **Approved By** information.
- (5) Click 'Add Warehouse' button.

The screen will be automatically refreshed, and the refreshed page will display the warehouse particulars that were added.

(6) Repeat Step (1) to (5) to add other warehouse(s) information.

Addresses of all warehouses where the products will be stored should be provided.

(7) Click 'Next' button to proceed to Part 5. Supporting Documents section.

Update warehouse(s)

- (1) Click on the warehouse required amendment from the Warehouse List table.
- (2) Make the required update.
- (3) Click 'Update Warehouse' button.



Remove warehouse(s)

- (1) Click on the checkbox adjacent to the warehouse(s) from the Warehouse List table.
- (2) Click '**Remove**' button to delete the warehouse(s).

4. Warehouse Particulars	s
4.1 Warehouse Address	
4.1.1 Address Type : *	Local
4.1.2 Postal Code : *	Retrieve Address
4.1.3 Block / House No :	4.1.4 Level - Unit : #
4.1.5 Street Name :	
4.1.6 Building Name :	
4.1.7 Other Address Det: Input specific identification nu the warehouse which is not re above, e.g. for address of 1, 4 #01-01, XYZ Building, Annex SINGAPORE 125455, 'Annex A entered in the 'Other Address 4.1.8 Country :	umber for AEC Road, AC, X, X X, an be
4.1.6 Country :	SINGAPORE
4.2 Storage Condition of	fWarehouse
4.2.1 Temperature: *	 15°C to 30°C (Room Temperature) 8°C to 15°C (Cool) 2°C to 8°C (Refrigerate, Do not freeze) -10°C to -20°C (Freeze) Others
4.2.2 Relative Humidity:	Min 🛛 🖇 – Max 🛛 %
4.2.3 Approved By:	Select One 🔻
Add Warehouse	
	rehouse List
10	
Remove	

Previous Next Reset

Part 5. Supporting Documents

This section allows the attachment of the supporting documents for the application.

Add Attachment

- (1) Click 'Choose File' button to select the required file for attachment.
- (2) Select the required file.
- (3) Click '**Open**' button in the pop-up window.
- (4) Click 'Attach Files' button for the file to be attached to this application.
- (5) Fill in the remarks in the 'Remark' field with regards to the file attached (if required).
- (6) Repeat Step (1) to (5) to add other documents. All supporting documents should be provided.
- (7) Click 'Next' button to proceed to Part 6. Confirmation and Declaration section.



Remove Attachment

- (1) Click on the checkbox adjacent to the attachment(s) from the List of Attachments Table.
- (2) Click '**Remove'** button to delete the document.

5. Supporting Documents			
To add an attachment, type in the the list below. Please click <u>here</u> for guideline on		utton. The	hen hit the Attach Files button to save the attachment to
Documents			
5.1 Store Layout Plan :	Choose File No file o	hosen	
5.2 Good Distribution Standard Operating Procedures :	Choose File No file c	hosen	
5.3 Good Distribution Practice Records :	Choose File No file c	hosen	
5.4 Other Supporting Documents :	Choose File No file c	hosen	
Attach Files			
Select All to delete all attachment	: records		
Sn ^{III} Attachment Name At	tachment Type	Size (Kb)	Remarks
1 🛛 🔤			
To remove an attachment, click o Remove	n the checkbox. Then hit	the Remo	nove button to remove the attachment from the list.
			Previous Next Reset

The file extensions, which are acceptable and supported for attachments, are:

- tif (Black & White)
- pdf (Adobe Acrobat files)
- xls (Microsoft Excel files)
- avi (audio visual, if required)
- jpg (graphics files)
- doc (Microsoft Word files)
- ppt (Microsoft PowerPoint files)
- mpeg (audio visual, if required)

Note: If the file size is too big (estimate about 2MB and above), the uploading time may be longer.

Part 6. Confirmation and Declaration

This section shows the information provided in all sections of the Application Form.

(1) Applicant is required to confirm the information provided in all sections are correct and click the **'Validate'** button.

(Note: Applicant may click 'Save' button to save a copy of the draft application if he/she wishes to complete the application at a later time.)

- (2) Once validation is successful, applicant is advised to read through the declaration carefully before accepting to undertake the conditions.
- (3) Click 'Submit' button to submit the Application Form.

Declaration			
 I, on behalf of my compan 	y, confirm that the information submitted in this applicat	ion is true and accurate.	
	Accept O Decline O		
Fill in the application form		Guideline	Help
1. Licence Duration 2. Company Particulars 8. Applicant Particulars	4. Warehouse Particulars 5. Supporting Attachments 6. Confirmation	Special Symbol Attach	d Save



Payment Advice

This section shows the total amount of money for the application.

There are 2 modes of payment available:

- GIRO (deducted from the relevant bank account)
- eNETS (Credit Card or Debit Card)

Payment Advice		
SnDescription		Amount (SGD)GST
1 Amd:		N
The total payment for your a	application is SGD	
The amount of SGD	will be deducted from your Giro Account.	
r		
Payment Advice		
Sn Description		Amount (SGD)GST
The total payment for you	r application is SGD !	
Payment Method: *	eNETS Credit Debit	ser before proceeding to submit your application

If the eNETS option is selected and then Credit option is selected, the page will be re-directed to the relevant screen for the applicant to input the credit card details.

e NETS		Monday, 09 January 2017
Consumer eNETS Privacy Policy	Credit/debit card payment Ty ou are using a pop-up blocker, please add the following list as your allowed stepsayed, or your transaction pages from the banks may not be stepsayed, or your transaction request may not be completed. 1. www.enets.g TRAINRECTION INFORMATION	Fast, Secure & Hassle-tree transactions
Security Guidelines	Merchant Name Health Sciences Authority Merchant Reference Code ECT1700002K NETS Reference Code 20170109152942902	
	Name on Card Card Number Image: Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Vicual Your Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. Please note that the Credit Card Number should be 13 or 16 digits. CVC1 (What is CV/ICVV2/CID) District I have read, understood and accepted the following: • The return & refund policy for the purchase of relevant products / services. • The collection, use, disclosure and sharing of this information, which to the best of my knowledge and belief is true and accurate and is for purposes reasonably required to process my application which are set out in NETS' Data Protection Policy.	
	SUBMIT CANCEL	



If the eNETS option is selected and then the Debit option is selected, the page will be re-directed to the relevant screen for the applicant to select the bank first before being re-directed to input the debit card details.

ENETS		Monday, 09 January 2017
	debit from bank account	
Consumer	If you are using a POP-UP BLOCKER, please add the following Otherwise, the relevant transaction pages from the banks cam transaction request cannot be processed. Click <u>here</u> for pop-u	not be displayed, and your
eNETS		
Privacy Policy	vowe enets sg desd2pay.dbs.com (for DBS/POSB Account holders) desd2pay.dbs.com sg (for UOB Account holders) vowe ofbank com sg (for Clifbank Account holders) vww.ofbank com sg (for Clifbank Account holders) vww.ofbank com (For COEB account holders)	
Security Guidelines Customer Service	 www.pus.com.sg (For Fus: account noiders) ibank.standardchartered.com.sg (For Standard Chartered account hold 	lers)
	REARSACTION INFORMATION Merchant Name Health Science Authority	
	Merchant Reference Code ET170003X NET5 Reference Code 201701091537425p0 NET5 Reference Code 201701091537425p0 Merchant Hostname http://bias.gov.sg	
	Amount Important Notice: Please note down the transaction	
	Information in this eaction just in case you need to raise any query on this transaction.	
	ServicePone liefly set to thin	
	Dana Mease seedta Dara	
Please do not use your BACK or I	RELOAD/REFRESH browser functions of this service	
© eNETS is a product of Nets	vork for Electronic Transfera (Singapore) Pile Ltd.	NETS in better way to pay
eNETS		Monday, 09 January 2017
	are dit/debit card reavenet	
	credit/debit card payment	Fast, Secure & Hassle-free
Consumer	altes. Otherwise, the relevant transaction pages from the banks may not be displayed, or your transaction request may not be completed.	transactions
eNETS	1. www.eneta.sg	100
Privacy Policy	TRANSACTION INFORMATION MasterCard. Verified by	SR2
Security Guidelines	SecureCode. VISA Merchant Name Health Sciences Authority	
Customer Service	Merchant Reference Code ECT170002X NET's Reference Code 20170109152942902 Amount SGD 500.00	
	Important Notice: Please note down the transaction Information in this section just in case you need to	P DA
	CREDIT/DEBIT CARD INFORMATION	
		A REPORT
	Name on Card	A WALL
	Card Number Please note that the Credit Card Number should be 13 or 16 digits.	
	Please input your card number without space or dash.	
	CVC2 [What is CVV/CVV2/Cld] Expiry Month Date (eg: 2017)	
	□ I have read, understood and accepted the following:	
	 The return & refund policy for the purchase of relevant products / services. The selfuction was disclosure and sharing of this 	
	 The collection, use, disclosure and sharing of this information, which to the best of my knowledge and belief is true and accurate and is for purposes 	
	reasonably required to process my application which are set out in NETS' Data Protection	
	Policy.	



Upon successful transaction, an eNETS official receipt and a HSA tax invoice will be generated.

	Official Receipt - HSA00000000002 - Microsoft Internet Explorer	
	🕜 Back - 🕗 - 🗷 🗟 🏠 🔎 Search 🤺 Favorites 🜒 Media 🕢 🔗 چ 🚍 - 🔜 🦓	2
TRANSACTION NOTICE TRANSACTION COMPLETE T'S APPROVED! Merchant Reference Code: ET15120211321870 NETS Reference Code: 20161202113218716 Date & Time: 02 12 2016 11:32:19	TAX INVOICE / RECEIPT Receipt No : HSA000000000002 Date/Time Agency : HSA-Health Sciences Authority Application : HSA-PAYMENT Paid via : Credit Card EP Ref No	
THANK YOU!	Sno Code/Description Unit Price(S\$) Qty	
TRANSACTION		
	Total (S\$) :	
	This is a computer-generated receipt. No signature is required.	~

If the payment was made via eNETS and was not completed successfully, the system will prevent retrieval of the draft application and the applicant will need to contact <u>HSA HelpDesk</u> for assistance.

	To be the leading innovative authority protecting and advancing national health and safety
TRANSACTION INCOMPLETE	CR0016 AUTHORIZATION AND AUTHENTICATION MODULE > CANCEL PAYMENT Your payment has been cancelled abnormally. Please re-visit your application again to make the payment.
Merchant Reference Code: EC161201162113836 NETS Reference Code: 20161201162117607	Best viewed using Internet Explorer 8.0 and above Last updated on 01 July 2014 Privacy Statement / Terms of Use / HSA Data Protection Policy / Rate Our Website © 2014. Health Sciences Authority. All Rights Reserved.
Date & Time: 01 12 2016 16:21:17	To be the leading innovative authority protecting and advancing national health and safety
 Unsuccessful transaction - Credit card number not allowed. Piease contact your service provider and quote response code (#10011202) 	CR0016 AUTHORIZATION AND AUTHENTICATION MODULE > FAILURE PAYMENT Payment failure. Please re-visit your application again to make the payment.
PRINT PRINT	Best viewed using Internet Explorer 8.0 and above Last updated on 01 July 2014 Privacy Statement / Terms of Use / HSA Data Protection Policy / Rate Our Website © 2014. Health Sciences Authority. All Rights Reserved.

To submit the completed application, click **'Submit'** button. Applicant will be prompt to confirm the submission. The application will then be submitted to HSA for the relevant personnel's processing.

Acknowledgment

This section acknowledges that the application has been submitted to HSA for processing. An application number will be generated for the successful application submitted.

Applicant may wish to print a copy of this acknowledgement page or take note of the application number for ease of reference. Applicant may provide the application number if he/she wishes to communicate with HSA.



PQ1001 APPLICATION FOR A

Acknowledgement		
Your application ha	we been successfully submitted	
Please note that yo	ur application number is 1600797N	
Client Code	:	
Licensee		
Name		

Note: Applicant can click 'Show Printer-Friendly version' to print or view the application.



Input Request

This section illustrates how applicant can respond to the Input Request raised to the application.

Input Request arises when the reviewing HSA officer requires further clarification from the applicant regarding the Application Form.

A notification will be sent to the applicant to inform the applicant to log on to <u>track@prism</u> to make the necessary changes.

Input request can be classified as Primary or Secondary.

- Primary Input Request requires changes to be made directly in the application form.
- <u>Secondary Input Request</u> requires applicant's explanation to certain matters pertaining to the application form submitted.

Responding to Primary Input Request

(1) Log on to <u>track@prism</u> -> select the correct Application / Submission Type -> select Licence Type -> select Enquiry Type -> key in the Application No. -> click 'Search' button.

PZ0951 TRACK@PRISM		
Important Notes: For HSA CRIS registered companies, user has to to access the required eservices.	be authorised with the appropriate access rights via CRIS managemen	t module
General Search		
Enter Transaction No or Application/Submissio	n No for fast and exact matched look-up	
Application/Submission Type *	New Application/Submission	
Licence/Permit/Certificate/Listing/Notification/R Type *	egistration	~
Enquiry Type *	Input Request 🗸	
Transaction No.		
Application/Submission No.		
Licence/Permit/Certificate/Listing/Notification/R No.	egistration	
Product Name.		
Submission Date (dd/mm/yyyy)	Το	
Last Update Date (dd/mm/yyyy)	То	
Search Reset	94 7501 1910815675 7224 724 724 724 724 724 724 724 724 72	

(2) When the search result is displayed, click the 'Application No.'

w Application/S	ubmission for	2723 - X2	(Input Request)			
NoApplication	Transaction No	Product Name	Application/Submission Status	Date Required	Last Updated Date	HSA Input Request
1600670D	т1601220К	NA	Input Request	22/06/2016		Click here for Primary IR (15/06/2016)

- (3) The webpage will display the application form as per previously submitted.
- (4) Proceed to make the necessary changes for the section(s) that required amendment, click 'Save' button and submit the revised application form.



Responding to Secondary Input Request

(1) Log on to <u>track@prism</u> -> select the correct Application / Submission Type -> select Licence Type -> select Enquiry Type -> key in the Application No. -> click **'Search'** button.

PZ0951 TRACK@PRISM		
Important Notes: For HSA CRIS registered companies, user has to access the required eservices.	to be authorised with the appropriate access rights via CRIS management n	nodule
General Search		
Enter Transaction No or Application/Submis	sion No for fast and exact matched look-up	
Application/Submission Type *	New Application/Submission	
Licence/Permit/Certificate/Listing/Notification Type *	n/Registration	~
Enquiry Type *	Input Request 🗸	
Transaction No.		
Application/Submission No.		
Licence/Permit/Certificate/Listing/Notification	n/Registration	
Product Name.		
Submission Date (dd/mm/yyyy)		
Last Update Date (dd/mm/yyyy)	То	
Search Reset		

(2) When the search result is displayed, click under the 'HSA Input Request' to view the comments left by the HSA officer and the necessary action to be taken with regards to the Application.

leas	e do not acce	ess the record i	using the new window v	/la right m	ouse click.			
Match	ing Record(s)					Page 1 Of 1	[First] 1 [Previou	us] [Next] [La
Ame	ndment for i		(Input Request)					
S/N	o Applicatio No	n Transaction No	Licence/Registratio No	n Produc Name	tApplication/Submissior Status	Date Required	Last Updated Date	HSA Input Request
1	1600783J	T1601374K	MCPH1600024	NA	Input Request	11/07/2016	04/07/2016	Click here fo Secondary IR (04/07/2010
leas	e do not acce	ess the record i	using the new window v	/ia right m	ouse click.			$\overline{)}$
Match	ing Record(s)					Page 1 Of 1	[First] [Previou	s] [Next] [La

Application resubmission is required for Primary IR but not for Secondary IR.

For Secondary IR, please response with your comments accordingly or else it will not be considered as submitted.

(3) Fill in any response in the text box for response to Secondary Input Request and click 'Submit' button.

	🥝 Input Reque	est List - Internet Explorer	*	· · ·		23		
	https://www-uat.hsa.gov.sg/prism/common/InputReqActList/list.do?action=list&irType=S&app_no=1600771U&eService=130&NOTI							
	INPUT REQUEST LIST (SECONDARY)							
	Application : 1600771U No							
I	Please reply with comments for each item in the action list and submit this secondary input request. Please note that resubmission of the application is not required.							
	Action List	Action	Due Date	A				
	SN			Applicant's Response (if any)				
	1.	For Secondary Screenshot	15/07/2016			~		
						~		
l								
					Submit Canc	el		



Other useful information

- 1. Applicant may check on the status of the application upon submission at track@prism.
- 2. Kindly contact the HSA Helpdesk if any technical issues (IT problems) during the application submission are encountered.

HSA HelpDesk Hotline : 6776 0168 (from 7:00 am to midnight daily) Email : <u>helpdesk@hsahelp.gov.sg</u>

3. For general enquiries or questions related to licences and certificates of manufacturers, importers and wholesalers, please contact the Audit and Licensing Division at Tel: 6866 1111.