



དཔལ་ལྷན་འབྲུག་གཞུང་། གསོ་བ་ལྷན་ཁག་ འབྲུག་བཟའ་ཆས་དང་སླན་རིགས་དབང་འཛིན།

ROYAL GOVERNMENT OF BHUTAN
MINISTRY OF HEALTH
BHUTAN FOOD AND DRUG AUTHORITY



INSPECTION SERVICES

APPLICATION FORM FOR IMPORT OF FOOD AND FOOD INGREDIENTS

1. Name and Address of Applicant:
2. Contact information (e.g, email, phone):
3. Operations: Import only _____ Import for further processing _____
4. Requested duration of permit _____

5. Food Business clearance	
6. Valid Trade Licence number	

7. Details of consignment(s)

Food Product Description	Packaging (e.g., size, weight)	Producer and/or exporter (if different)

8. Label: Please attach a copy for packaged goods
9. Country of origin of food _____
10. Where applicable, country of transit: _____
11. Means of conveyance _____
12. Place of entry _____
13. Final destination _____

Attach: 1. Certificate of Analysis 2. Organic/GAP/any other food safety management system certifications

Place _____
Date _____

Signature of applicant & Seal

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