药品委托生产延续

申请材料真实性自我保证声明

行政许可 (行政确认) 申请材料真实性保证声明

Statement of Guarantee on the Authenticity of the Information Submitted

申请事项 Topics to be applied	药品委托生产延续
申请人 applicant	企业名称(或姓名): Name: 南京同仁堂药业有限责任公司 身份证号: ID number: (如属于企业申请划 "/"。In the case of enterprise application, please fill "/"。)
承诺事项	
Guarantee	
我(们)保证:	
We (personality or the	enterprise)guarantee: 聿法规规章和有关规定。
	丰法规规草和有天规定。 iducted in accordance with the national law and regulations in
nvolved.	
2、所有资料真实有效,	
All the information sub source.	mitted in this application is authentic and derived from the reliable
3、申请资料的纸质版与	5电子版完全一致。
The electronic and pape	er version of application should be identical.
4、如有虚假,愿意承担 Bear the responsibility	^{旦相应} 的法律责任。 for all the falsehood of the information submitted and will assume
all the lawful liability.	an the faisehood of the information submitted and will assume
	To the
法定代表人(或委托代理人) 答名。
Signature of the applicant (o	or the agent authorized by the applicant)
	(企业盖章)
	(the seal of the enterprise)
	日期 Date: 日
申请材料真实性的保证声	明应由申请人(申办企业由法定代表办)签署出放。委托
代表人签署的, 应出具由	申请人签署的有效委托书。
The signature would 1	e by himself (or herself). In the case of signature made by

2. 本表由江苏省食品药品监督管理局制定。 This format is established by Jiangsu Food and Drug Administration.