



Government of the Republic of Trinidad and Tobago

Ministry of Health

TOBACCO CONTROL UNIT

#4-6 Queen's Park East, Port of Spain 101002

**Tobacco Product Licensing
STATEMENT OF DECLARATION**

I,
(Name in Block Letters) (Position in Business / Company)

of
(Business / Company Name in Block Letters)

of.....
(Business / Company Address)

hereby certify that the information provided to the Tobacco Control Unit, Ministry of Health, is true, correct and complete to the best of my knowledge information and belief.

I hereby certify that I will comply with the requirements of the Tobacco Control Act Chapter 30:04, the Tobacco Control Regulations (2013) and the Tobacco Control (Amended) Regulations (2019) of Trinidad and Tobago.

I understand that failure to comply is a direct breach of the Tobacco Control Act Chapter 30:04, the Tobacco Control Regulations (2013) and the Tobacco Control (amended) Regulations (2019) of Trinidad and Tobago and can result in the revocation of any licence issued to the Business or Company above to manufacture, distribute, import, export and/or wholesale tobacco products.

Declared this day of 20 ..

Signature:

Signature of Witness:

Name of Witness

Address of witness

Occupation of Witness



1 (868) 217-4664
Ext. 13830-13836



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