

## Government of the Republic of Trinidad and Tobago

## Ministry of Health TOBACCO CONTROL UNIT

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

## **CHECKLIST OF REQUIRED DOCUMENTS/ITEMS**

Please ensure you have attached the following required documents/items upon submission of your application/ at the time of your appointment:

No.	Documen∜item	Required by Applicant Type				
		М	I	Ē	D	W
1	Business Registration Certificate / Company Certificate of Incorporation	<b>√</b>	<b>√</b>	<b>√</b>	V	V
1.	business Registration Cartificate / Company Certificate of Incorporation	V	V	V	V	V
2.	Notice of Directors (new companies)	<b>V</b>	V	V	<b>V</b>	1
3.	Notice of Address for the Company (new companies)	V	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>
4.	Annual Return (most recent)	$\checkmark$	<b>V</b>	<b>V</b>	<b>V</b>	V
5.	Form 45 Return of Beneficial Interest or Form 46 for new companies (most recent)	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>	V
6.	Copy of Applicant's ID/Passport/Driver's Permit (2 forms of ID)	$\sqrt{}$	V	<b>V</b>	<b>V</b>	1
7.	Copy of ID/Passport/Driver's Permit of Broker/Person Acting on Behalf of Applicant where applicable (2 forms of ID)	V	<b>V</b>	<b>V</b>	<b>V</b>	1
8.	BIR Number	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>	<b>√</b>
9.	VAT Registration Number (where applicable)/VAT Clearance Certificate	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>
10.	Original fee receipts from the District Revenue Office	$\checkmark$	<b>V</b>	<b>V</b>	<b>V</b>	<b>V</b>
11.	3D sample or printed image of product packaging with mandatory labelling requirements	<b>V</b>	<b>V</b>	<b>V</b>		
12.	Product Specification Sheet (applicants to acquire from manufacturer)	<b>V</b>	V	V		
13.	Material Safety Data Sheet (MSDS) (applicants to acquire from manufacturer)	<b>V</b>				
14.	Evidence of application for and/or the trade name and registration number of the tobacco product from the Intellectual Property Office of the Ministry of the Attorney General and Legal Affairs	V	V	V		
15.	Previous licences issued by the Ministry of Health (for renewals only)	$\sqrt{}$	<b>V</b>	<b>V</b>	<b>V</b>	V
16.	Form A: Authorization Letterfor Broker/Person Acting on Behalf of Applicant (where applicable)	<b>V</b>	<b>V</b>	1	<b>V</b>	<b>V</b>
17.	Declaratory Statement by Applicant (to be provided by the TCU)	<b>√</b>	<b>V</b>	<b>V</b>	<b>V</b>	<b>√</b>

NB: M- Manufacturer I- Importer E- Exporter D- Distributor W- Wholesaler





