

Republic of the Philippines
Department of Health
FOOD AND DRUG ADMINISTRATION

**SELF-ASSESSMENT FORM FOR SALES PROMO PERMIT
INITIAL () / AMENDMENT ()**

APPLICANT NAME	:	
APPLICANT ADDRESS	:	
DTN	:	
O.R. No. / Ref.No.	:	
Amount Paid	:	
Sales Promo Permit No.	:	

Directions:

Fill out the form by ticking the applicable column. Provide remarks on the client's column when necessary.

DOCUMENTARY REQUIREMENTS:	Yes	No	REMARKS	
1. Integrated Application Form				
• <i>Is the application form properly filled out?</i>	<input type="checkbox"/>	<input type="checkbox"/>		
2. Intent Letter				
• <i>Is the request clear and within the scope of sales promo?</i>	<input type="checkbox"/>	<input type="checkbox"/>		
• <i>Is the letter signed by the applicant's approving authority?</i>	<input type="checkbox"/>	<input type="checkbox"/>		
3. List of Participating Products				
• <i>Is the list of participating products (Sheet 3) provided in excel format?</i>	<input type="checkbox"/>	<input type="checkbox"/>		
4. Copy of valid CPR/CPN Registration				
• <i>Are all the participating products duly registered or in the process of renewal?</i>	<input type="checkbox"/>	<input type="checkbox"/>	«Registration_No» «CPR_Validity»	
• <i>Is/are there participating product/s with CPRs/CPNs that will expire soon or within 6 months?</i>	<input type="checkbox"/>	<input type="checkbox"/>		
• <i>Identify, if applicable.</i>				
5. Information Sheet				
• <i>Is the promo title not offensive, obscene, scandalous, against public moral and/or misleading?</i>	<input type="checkbox"/>	<input type="checkbox"/>	«Promo_Title»	
• <i>Is the requested promo duration acceptable?</i>	<input type="checkbox"/>	<input type="checkbox"/>	Initial	Amendment
• <i>Is the promo coverage clearly indicated and within acceptable venue?</i>	<input type="checkbox"/>	<input type="checkbox"/>	Initial	Amendment
• <i>Is the promo mechanic acceptable or compliant with existing rules and regulations?</i>	<input type="checkbox"/>	<input type="checkbox"/>	Amendment, if applicable: «Specific_Amendment_Applied»	
6. Collateral/ Promo Materials				
• <i>Is/are there collateral material/s used?</i>	<input type="checkbox"/>	<input type="checkbox"/>	Initial	Amendment
• <i>Is/are the collateral material/s misleading, vague, and not compliant with existing rules and regulations?</i>	<input type="checkbox"/>	<input type="checkbox"/>		

--- To be filled out by CDRRHR-LRD Personnel ---

Decision:	Remarks:	Remarks:
Approval <input type="checkbox"/>		
Denial <input type="checkbox"/>		
Clarification <input type="checkbox"/>		
Name & Signature:	Evaluator:	Supervisor: «Checked_by»
Date:		