ANNEX C

List of Requirements for Specific Variation in the LTO

1. Major Variation for Local Manufacturers

Type of Variation	Requirement
Transfer of Location of	Application Form
Manufacturing/Packing/Repacking	2. Proof of business address
Plant	reflecting the new office location:
	a. For Single Proprietorship:
Physical transfer of the establishment	Business Permit/Mayor's
(and may entail changes in the	Permit or Barangay Business
previously approved address)	Permit/Clearance reflecting the
	new office location;
	b. For SEC-registered
	establishments:
	- Amended Articles
	of Incorporation (if transferred
	from one city/municipality/
	province); or
	- Updated General Information
	Sheet (GIS) from SEC (if
	transferred from one city/
	municipality/province)
	If the establishment address is different from the address indicated in the SEC Registration, provide LGU/Mayor's Permit or Barangay Business Permit/Clearance reflecting the new office location. 3. Updated Site Master File 4. Payment of appropriate fees.
Expansion of	Application Form
Manufacturer/Packer/Repacker and/or	2. Updated Site Master File and Floor
Additional Product Line; or Change of	Plan showing the expansion made
Manufacturing Activity	to be presented upon inspection
·	3. Payment of appropriate fees.
Expansion shall refer to expansion	
made which is adjacent to the	For drug and food products,
existing location of the	satisfactory laboratory analysis of not
establishment	more than one (1) year from the
 Additional product line refers to 	issuance shall also be presented
additional type or class of products	
produced within the same	
manufacturing site (e.g., sterile line,	
beverage line, etc.)	

 Change in manufacturing activity shall refer to an additional activity that a manufacturer engages in (e.g., LTO as Manufacturer with additional activity as Repacker)

2. Minor Variation

Transfer of Location of Offices

Physical transfer of the office of the establishment (which may also entail changes in the previously approved address)

Proof of business address reflecting the new office location:

- **1.** Application Form
- **2. For Single Proprietorship**Business Permit/Mayor's Permit or

Barangay Business Permit/Clearance reflecting the new office location:

- 3. For SEC-registered establishments
 - b. Amended Articles of Incorporation (if transferred from one city/municipality/province);
 - c. Updated General
 Information Sheet (GIS)
 from SEC (if transferred
 from one
 city/municipality/province)
- 4. Payment of appropriate fees.

If the establishment address is different from the address indicated in the SEC Registration, provide LGU/Mayor's Permit or Barangay Business Permit/Clearance reflecting the new office location.

Transfer of Location of Drug Retailers

Physical transfer of the drug retailer (which may also entail changes in the previously approved address)

Proof of business address reflecting the new office location:

- **1.** Application Form
- 2. For Single Proprietorship

Business Permit/Mayor's Permit or Barangay Business Permit/Clearance reflecting the new office location;

- 3. For SEC-registered establishments
 - d. Amended Articles of Incorporation (if transferred

	from one city/municipality/province); or
	e. Updated General Information Sheet (GIS) from SEC (if transferred from one
	city/municipality/province) 4. Payment of appropriate fees.
	If the establishment address is different from the address indicated in the SEC Registration, provide LGU/Mayor's Permit or Barangay Business Permit/Clearance reflecting the new office location.
Change of Distributor Activity	 Application Form Contract Agreements showing
Shall refer to an additional/deletion of/change in activity that the distributor engages in	2. Contract Agreements showing change in activity3. Payment of appropriate fees.
Transfer/Addition of Warehouse	1. Application form
	2. Business permit/Mayor's
Physical transfer and addition of the	permit/Barangay Clearance
warehouse of the establishment	reflecting the new address 3. Payment of appropriate fees.
Additional Drugstore Activities	 Application Form Additional Credentials of Pharmacist, as applicable Other documents related or specific to the additional activity, such as but not limited to: Adult vaccination Standard Operating Procedure (SOP) for the cold chain management following FDA Circular 2021-003 (Revised Guidelines on the Cold Chain Management for Pharmaceutical Products and Establishments) SOP for the vaccination/immunization activities Certification as a Certified Immunizing Pharmacist Dispense Vaccines and Biologicals SOP for the cold chain management following FDA Circular 2021-003 Mobile Pharmacy

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	i. SOP for the conduct of mobile
	pharmacy activities
	ii. Image/Picture with
	description of the mobile
	pharmacy vehicle
	iii. Credentials of the supervising
	pharmacist of the mobile
	pharmacy
	d. Online Ordering and Delivery
	i. SOP for the online ordering and delivery activities
	ii. Website link
	iii. Website screenshot showing
	the ordering system and the
	placement of LTO details
	iv. Other documents as required
	in separate issuance for e-
	Pharmacy
	e. Sterile Compounding and Non-
	Sterile Complex Compounding
	i. SOP for the compounding
	activities.
	ii. Establishment shall be
	inspected for GMP clearance
	inspected for SIMI creatures
	4. Payment of appropriate fees.
Expansion of Office Establishments	1. Application Form
and Drug Retailers	2. Current floor plan
	3. Expansion floor plan
Shall refer to expansion made which	4. Payment of appropriate fees
is adjacent to the existing location of	
the establishment	
Change of Ownership	Business name registration reflecting new ownership;
Change only in the business name of	2. Any proof of the transfer of
the establishment	ownership such as any of the
	following;
	i. deed of sale or assignment or
	transfer of rights/ownership;
	ii. memorandum of agreement
	(MOA);
	iii. Notarized affidavit of the owner,
	proprietor, chairman or CEO of the
	establishment validating the transfer.
Zonal Change in Address	1. Application Form
0	2. Certificate of Zonal Change from the
Change of the name/number of the	Local Government Unit or Business
street/building without physical	Permit/Mayor's Permit/Barangay
transfer of the establishment	Clearance stating that there is no
	actual transfer of the establishment
	uctual transfer of the establishment

	3. Payment of appropriate fees
Change of Qualified Person	1. Application Form indicating the
	name of new qualified person
Change in the identified qualified	2. Valid PRC ID
person initially registered with the	3. Proof of termination of employment,
FDA	if previously connected with another
	pharmacy/establishment or
	Notarized Waiver of Liability/
	Sworn Statement stating the QP is
	effectively resigned from the
	previous employer.
	For Pharmacists handling multiple
	RONPDs: List of all RONPDs handled by
	the Pharmacist (to include, Name of
	establishment, Address, Day and Time of
	shift and LTO Number)
	4. Payment of appropriate fees.
Change of Authorized Person	1. Application Form indicating the
	name of new authorized person and
Change in the authorized person	updated contact details
initially registered with the FDA	2. Valid government issued ID
	3. Payment of appropriate fees.
Addition/Deletion of Sources and	1. Application Form
Products	2. Notarized Valid Contract
	Agreement; For foreign source(s), a
Addition/deletion of source(s) and	copy of the contract agreement duly
product(s) in the previous/existing	authenticated by the host
list	government of the country of origin
	(legalized by the Philippine
	Embassy/Consulate if from a non-
	Apostille country 3 Poyment of enprepriets fees
	3. Payment of appropriate fees.