**Export Permit Application Form for Medical Devices and Supplies Not Intended for Marketing in the Saudi Market (Printed on Official Establishment Letterhead)**

**His Excellency the Director of Import and Export Permissions Department, May Allah bless him**

May the peace, blessings, and mercy of Allah be upon you

|  |  |
| --- | --- |
| Establishment Name: |  |
| Commercial Registration Number: |  |
| ID Number in GHAD System: | C- |

We, the establishment whose data is shown in the table above, kindly request the issuance of an export permit for the medical devices and supplies listed in the following table:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Beneficiary Country: |  | | | | |
| Export Port: |  | | | | |
| Products Details: | | | | | |
| Product Name | | Invoice Number | Quantity | Unit | Customs Tariff (HS Code) |
|  | |  |  |  |  |
|  | |  |  |  |  |
|  | |  |  |  |  |

Note that we pledge to the following:

1. To refrain from selling these products within the Saudi market.
2. Placing a statement “for export only” on products intended for this purpose.
3. Maintaining export records of production line outputs.
4. Maintaining documents related to any medical device/supply and submitting them to the Authority upon request.
5. Adherence to the Authority’s conditions and requirements during inspection visits.
6. Supplying all requests for these products to health provider and the local market at the time agreed upon with the requester.
7. The current stock, along with the quantity that can be produced from raw materials, must be sufficient to cover the Saudi market's consumption for a four-month period (for manufacturers only).
8. The Authority shall not receive a notification from a health provider stating that the Company informed the health provider that the product was not available.

**Kindly accept our sincere regards and appreciation.**

Name:

Stamp of the Establishment:

Date:

Signature: