



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

AFFORDABLE MEDICINES

LICENSING UNIT

Guideline for the completion of the Application Form for:

- A Licence to Dispense Medicines (Authorised Prescribers)
- A Licence to Compound & Dispense (Homeopaths Only)

I: General Information

1. Dispensing Licence applications are made to the Director-General: Health, in terms of Section 22C(1)a of the Medicines and Related Substances Act (Act 101 of 1965), as amended.
2. All applications must be completed in full, using black ink. Fields marked with * are compulsory. **Incomplete applications will not be processed.**
3. Only **original** applications must be submitted to the Department. Applications may be posted, couriered or hand delivered. **NO FAXED OR EMAILED COPIES WILL BE ACCEPTED.**
4. Before submitting the application form, have the following documents on hand:
 - a. Certified copy of Identity Document
 - b. Certified copy of your registration card with Statutory Council
 - c. Certified copy of certificate of completion of the Dispensing Course with a provider accredited by the South African Pharmacy Council (SAPC)
 - d. Proof of payment of the non-refundable application fee and annual fee
 - e. Nurses only:
 - i. Completed and signed Section H of application form
 - ii. Confirmation of employment on company letter head and signed by an authorised manager
 - iii. Proof of areas of specialisation and protocol competencies (certified)
5. **NOTE: Applications are processed within 90 days of receipt of all required documents.**
6. Application outcomes are posted to applicants via registered mail, to the postal address supplied on the application form. They may also be collected from the Department in person. Applicants may also send by courier (at own cost) to collect.

II: Completing the Application Form

SECTION A to C:

- Complete General Information, Residential Address & Business Address.
- Ensure that you include the Province at which the Dispensing Licence will be utilised.



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SECTION D:

- Indicate profession as well as qualification obtained.
- Ensure that the Statutory Council and Registration Number are supplied for each qualification listed.

SECTION E

- This information refers to the requirements to comply with Good Pharmacy Practice Requirements. This is to ensure that the norms and standards as required by the South African Pharmacy Council are complied to. It is mandatory to answer all the questions.

SECTION F:

- This section indicates documentation that must be submitted together with the application form for the dispensing licence.

SECTION G:

- This section is a declaration by the applicant that the information furnished to the Department is true and correct. It also ensures that the applicant is aware that inspections may be done by the Department on the premises, and gives consent to these.

SECTION H (Nurses ONLY):

- This section must be completed by nurses only. It covers authorisation in terms of Section 56(6) of the Nursing Act, 2005 (Act 33 of 2005).
- This section must be accompanied by the required documents.

SECTION I & J:

- Section I is a declaration by the applicant that the information furnished to the Department is true and correct. It also ensures that the applicant is aware that inspections may be done by the Department on the premises, and gives consent to these. This section must be signed in front of the Commissioner of Oaths, who will then proceed to complete section J.



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III: Application & Annual Fees Payable

- A non-refundable application fee of R1000-00 (as published in the Government Gazette) is payable once off on application. **No Cheque payments are accepted.**
- An annual fee of R200-00 per year must be paid on application, and is payable yearly after that on or before 28 February.
- Proof of payment of both amounts must be submitted together with your application form.
- Your Statutory Council Number (without the Prefix Letters) must be used as the reference when making payments to the Department.
- **Note: Where the Statutory Council Number is less than 8 (eight) numbers – please add zero's at the end to make up 8 (eight) numbers.**
- Payments to the National Department of Health are payable to the following account:

Banking details:

Bank	:	ABSA
Account Holder	:	National Department of Health
Branch	:	Vermeulen Street
Branch code	:	632005
Account No.	:	405 364 3510
Account type	:	Cheque account
Beneficiary Ref.	:	Statutory Council Registration Number ONLY

IV: Delivery Address

POSTAL ADDRESS	COURIER/HAND DELIVERY
National Department of Health Affordable Medicines: Licensing Unit Civitas Building, South Tower – 4 th Floor Private Bag x828 Pretoria 0001	National Department of Health Affordable Medicines: Licensing Unit Civitas Building, South Tower – 4 th Floor Cnr Thabo Sehume & Struben Streets Pretoria Central 0001

V: Enquiries

EMAIL (preferred)	:	dispensepps@health.gov.za
Telephone	:	012 395 8314/8315
Facsimile	:	086 621 0829