Chemical Requirement Verification Form-Stock Balance Sheet

Relevant legal compliance: CONVENTIONS AGAINST ILLICIT TRAFFIC IN NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES ACT, No. 1 OF 2008 AND THE REGULATIONS MADE THERE UNDER "ESTABLISHMENT OF PRECURSOR CONTROL AUTHORITY REGULATIONS, No. 1653/7 OF 2010"

E mail: precursorchemstock@nddcb.gov.lk Phone Number:0112870762

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Responsible Person : Address :

Contact Person Designation : Signature :

Phone Number: Fax: E mail:

Company Stamp:

License Period : Category: Importer/Exporter/Dealer/End User Month/ Year:

common							Importer/Exporter			Dealer				End User						
Chemical name (Approve d by PCA)	CAS D No. and HS code	Date	Invoice Number	Ope ned bala	ed in ala hand	Stora ge locati on	Supplier name Address and country (Importer or exporter)	xported quantity	Bills of ladings reference numbers	Purchased quantity KGS	Supplier Name and address	Dealt quantity	Local purchas ed quantity	Supplier Name & Address	End Used quantity	Purpose of use	Quantity of the chemical used per unit of the production process	Total Chemical Production		
				nce														quantity	quantity (please attach evidential document proof of total annual production)	

Notice Every customer registered under Precursor Control Authority should e-mail their monthly stock balance sheet to the Authority in the end of each month or by the first of the following month. On renewal of application, customer should submit the annual stock balance sheet which is in compliance with monthly stock sheet