APPLICATION FORM

(IMPORT)

This format to be used in applying for permission to **import** Stimulants Raw Materials by carrying.

|  |  |  |
| --- | --- | --- |
| Stimulants Raw Materials to beimported by carrying | Name of Stimulants Raw Materials | Quantity |
|  |  |
| Reason for the entry into Japan |  |
| Reason for the necessity for Stimulants Raw Materials use |  |
| Time of entry into Japan |  |
| Name of port of entry |  |
| As stated above, I hereby apply for permission to import Stimulants Raw Materials by carrying.Date: Address:Phone: Fax:E-mail:Name: Signature:To: Director-GeneralKanto-Shin’etsu Regional Bureau of Health and Welfare |

\*　This form should be typed or printed.

\*　Separate application forms for each **Import** and **Export** of Stimulants Raw Materials are required.

APPLICATION FORM

(EXPORT)

This format to be used in applying for permission to **export** Stimulants Raw Materials by carrying.

|  |  |  |
| --- | --- | --- |
| Stimulants Raw Materials to beexported by carrying | Name of Stimulants Raw Materials | Quantity |
|  |  |
| Reason for departurefrom Japan |  |
| Reason for thenecessity for Stimulants Raw Materials use |  |
| Time of departurefrom Japan |  |
| Name of port ofdeparture |  |
| As stated above, I hereby apply for permission to export Stimulants Raw Materials by carrying.Date: Address:Phone: Fax:E-mail:Name: Signature:To: Director-GeneralKanto-Shin’etsu Regional Bureau of Health and Welfare |

\*　This form should be typed or printed.

\*　Separate application forms for each **Import** and **Export** of Stimulants Raw Materials are required.