APPLICATION FORM

(IMPORT)

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

|  |  |  |
| --- | --- | --- |
| Stimulants Raw Materials to be  imported 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-General  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 be  exported by carrying | Name of Stimulants Raw Materials | Quantity |
|  |  |
| Reason for departure  from Japan |  | |
| Reason for the  necessity for Stimulants Raw Materials  use |  | |
| Time of departure  from Japan |  | |
| Name of port of  departure |  | |
| 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-General  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.