**Application form**

**“Cosmetic Product Claims Evaluation”**

**Notifier/Applicant information:**

|  |  |
| --- | --- |
| **Name** |  |
| **Commercial registration number** |  | **Expiry date** |  |
| **Area/City** |  | **Neighborhood/street** |  |
| **Phone/Extension number** |  | **E-mail** |  |
| **zip code** |  | **Post** |  |

**Product information:**

|  |  |  |  |
| --- | --- | --- | --- |
| Product name |  |  |  |
| Company Name (brand owner) |  |  |  |
| Company’s country/Address |  |  |  |
| Notification number (if the product is notified) |  |  |  |

**Claims submitted for evaluation (as written on the label):**

|  |  |
| --- | --- |
| **1** |  |
| **2** |  |
| **3** |  |
| **4** |  |

**Information of the person authorized to communicate with the SFDA:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Authorized person information** | **Name** | **Mobile** | **E-mail** |
|  |  |  |

**Pledges:**

* I pledge the validity and accuracy of the data provided in this application.
* I pledge that the product attached to this application is in conformity with the rules, regulations and circulars in force in the Kingdom of Saudi Arabia. I also pledge to adhere to any future regulations approved by the Saudi Food and Drug Authority.
* I pledge full responsibility for any claims brought by the consumer or others and for any compensation awarded, and that the Saudi Food and Drug Authority is not responsible for any lawsuits, claims or compensation related to the safety of the cosmetic product.
* I pledge not to use this certificate for products other than provided in the application. If otherwise, I acknowledge committing fraud in documents and I afford the legal penalty.
* I pledge not to use this certificate for advertising or marketing purposes or to indicate the Authority’s acceptance of these claims.
* Not requesting a refund after evaluating the application.

**Signature of the Owner/General Manager of the Company**