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	Health Canada Health Products and Food Branch HPFB Inspectorate	
DIVISION 7 NOTIFICATION FORM		
1.	This serves to notify Health Canada as required by section C.07.011 of the <i>Food and Drug Regulations</i> .	
2.	The drug product which is the subject of this notification is <i>(brand name of the drug product, name of the drug product as set out in Schedule 1 of the Patent Act and, if applicable, the strength, dosage form and route of administration of the drug product),</i> with Export Tracking Number	
3.	This notification pertains to <i>(check one only)</i> : <input type="checkbox"/> the manufacturing of the first lot of the above named drug product. The lot number is _____ OR <input type="checkbox"/> the exportation of a subsequent lot of the above named drug product. The lot number is _____	
4.	The quantity of the above named drug product to be exported for the lot in question is _____	
5.	The name and address of the manufacturer are as follows:	
6.	The name, title, address and phone number of the undersigned authorized representative of the manufacturer are:	
Dated at _____ the _____ day of _____, _____		
_____ Authorized representative of the manufacturer		

Send the completed, signed and dated form by fax or by e-mail to:

**Manager, Drug GMP Inspection Unit
HPFB Inspectorate
Health Product and Food Branch
Health Canada
Fax #: 613-957-6709
E-mail Address: ATM_questions_AAM@hc-sc.gc.ca**