

Department of Health and Human Services Food and Drug Administration	<h2 style="margin: 0;">REQUEST FOR CERTIFICATE OF A PHARMACEUTICAL PRODUCT FOR CDER PRODUCTS</h2>
---	---

**GENERAL INFORMATION**

Firms exporting drugs from the United States, are often asked by their customers or foreign governments to supply an export certificate for products regulated by the U.S. Food and Drug Administration (FDA). FDA issues export certificates for drugs that are approved or licensed by FDA to be marketed in the United States and for over-the-counter drugs that follow an FDA monograph. FDA also issues export certificates for unapproved drugs that meet requirements of federal law. The drug export requirements can be found in section 801 and /or 802 of the Federal Food, Drug, and Cosmetic Act (FD&C Act). The Center for Drug Evaluation and Research (CDER) issues Certificates of Pharmaceutical Product (CPP) for human drugs that it regulates. CPPs are the only type of export certificate that CDER issues and they are requested by firms to help them qualify their product for importation into a foreign market or to receive approval, licensing or registration of the drug abroad. CPPs conform to the format established by the World Health Organization (WHO) and expire 2 years from the date of issuance.

Electronic CPPs for drugs exported from the U.S. are issued in .pdf document formats. Different ribbon colors are used to designate the type of CPP issued, as follows:

- Red designates FDA-approved products;
- Purple designates over-the-counter (OTC) products;
- Blue designates unapproved products;
- Yellow designates drugs manufactured in foreign facilities; and
- Orange designates Active Pharmaceutical Ingredients (APIs).

Under Section 801(e)(4)(B) of the FD&C Act, FDA is authorized to charge a fee for CPPs issued within 20 days of receipt of an application, not to exceed \$175.00. The fees are as follows:

- First certificate for the same country in the same application ..... \$175.00
- Second certificate for the same country in the same application ..... 90.00
- Third and subsequent certificates for the same country in the same application ..... 40.00

Invoices are issued quarterly.

Send CPP Requests and supporting documents to the following address:

Food and Drug Administration, Center for Drug Evaluation and Research (CDER), Export Certificate Program,  
 10903 New Hampshire Avenue, Building 51, Room 4249, Silver Spring, MD 20993-0002.

For inquiries about CPPs, please e-mail [CDERExportCertificateProgram@fda.hhs.gov](mailto:CDERExportCertificateProgram@fda.hhs.gov).

For the most current CDER Export Certificate Program information, please visit: <https://www.fda.gov/drugs/guidance-compliance-regulatory-information/human-drug-exports>

**1. Requestor Information**

Name	Address
Firm	
Telephone number	E-mail address

**2. Drug Information**

Drug Proprietary name
Dosage form (e.g. capsules, powder, drops)

**Instructions begin on page 5.**

3. Active Ingredient Information

Active ingredient		
Amount per unit dose	FDA product listing number (e.g., NDC)	Is the product currently marketed in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No

4. Billing and Shipping Account Information

Is the Billing Contact and Address the same as the applicant?  
 Yes  No *If no, please provide Billing Contact and Address below.*

Billing contact name	Address
Firm Tax ID code	

5. Drug Marketing Information

FDA drug approval number (ANDA, BLA, NDA) or FDA OTC Monograph citation/title	Date of drug approval or OTC monograph ruling (mm/dd/yyyy)
<b>Please provide a copy of the drug approval letter. Also, please note that "licensed drug" refers to a drug with an FDA drug approval number.</b>	
Product license holder	Address
Status of product license holder (mark appropriate item(s)) <input type="checkbox"/> Manufacturer <input type="checkbox"/> Packager and/or Relabeler <input type="checkbox"/> Neither	

6. Applicant for Certificate Information

Applicant for Certificate	Address
Status of the Applicant for Certificate (mark appropriate item(s)) <input type="checkbox"/> Manufacturer <input type="checkbox"/> Packager and/or Relabeler <input type="checkbox"/> Neither	For unapproved drugs and APIs, mark the category that indicates why authorization is lacking (mark appropriate item(s)) <input type="checkbox"/> Not required <input type="checkbox"/> Not requested <input type="checkbox"/> Under consideration <input type="checkbox"/> Refused

7. Facilities Involved in the Manufacturing of the Exported Product (A maximum of three facilities and only one drug manufacturer may be listed per application.)

Facility name (1) and role (e.g., API manufacturer, labeler, drug manufacturer)	Address
Firm FDA Registration Number (FEI number and/or DUNS number)	Date of most recent inspection

(Item 7 entry sets continued, next page)

7. Facilities Involved in the Manufacturing of the Exported Product (Continued)

Facility name (2) and role (e.g., API manufacturer, labeler, drug manufacturer)

Address

Firm FDA Registration Number (FEI number and/or DUNS number)

Date of most recent inspection

Facility name (3) and role (e.g., API manufacturer, labeler, drug manufacturer)

Address

Firm FDA Registration Number (FEI number and/or DUNS number)

Date of most recent inspection

8. Importing Countries (List in columns and indicate if multiple copies for a country are needed, please limit to 15 countries per application.)

9. Total number of certificates requested: \_\_\_\_\_

**CERTIFICATION STATEMENTS *(Complete all that apply)***

**EXPORTER'S CERTIFICATION STATEMENT**

The information, contained in this request for a Certificate of a Pharmaceutical Product is true and accurate based upon the current approval or other legal basis permitting marketing of the product. We acknowledge that any false or fictitious statements made in the application used by FDA to process the certificate will be in violation of the United States Code, Title 18, Section 1001.

Signature	Date
Name and Title:	

**AUTHORIZATION TO RELEASE STATEMENT**

I authorize the Food and Drug Administration to release this information in the certificate format. I understand that we will be billed a fee for each certificate not to exceed \$175.00. If you have any questions or require additional information regarding this correspondence, please e-mail me at \_\_\_\_\_ (e-mail address).

Signature	Date
Name and Title:	

**CERTIFICATION OF EXPORTATION FROM THE U.S. FOR FOREIGN MANUFACTURING SITES**  
*for products manufactured in a country outside of the United States*

I certify that \_\_\_\_\_  
*(Product Name)*  
is manufactured and/or packaged in \_\_\_\_\_  
*(Name of Foreign Country)*  
and is exported from the United States.

Signature	Date
Name and Title:	

**CERTIFICATION OF EXPORTATION FROM THE U.S. FOR UNAPPROVED DRUG PRODUCTS**

I certify that \_\_\_\_\_  
*(Product Name)*  
is intended for export and is in compliance with the applicable provisions of section 801(e) and section 802 of the FD&C Act, as amended by the FDA Reform and Enhancement Act of 1996.

Signature	Date
Name and Title:	

**Department of Health and Human Services  
Food and Drug Administration**

**CERTIFICATE OF A PHARMACEUTICAL PRODUCT  
*Application Instructions (for CDER)***

**General Information**

- Before preparing your application, please consult with the importing country to determine exactly what type of information is required for the certificate.
- A US Tax Code/US Tax number is required to process your application.
- The “requestor” is the firm or person filling out the application. The “applicant” is the firm or person requesting the CPP. For example, a firm (applicant) may hire another firm (requestor) to fill out an application on its behalf.
- CDER recommends sending your application with confirmation of delivery receipt to ensure delivery.
- Do not submit applications in binders or place attachments in plastic sleeves.
- A separate application must be made for each pharmaceutical product.
- Multiple countries for each pharmaceutical product may be requested in one application.
- If requesting a CPP with more than one drug manufacturer, please submit separate applications for each drug manufacturer. You may include more than one labeler or packager on one application.
- Foreign names for the pharmaceutical products may be included.
- For container labels, please provide the actual label or a copy of the art layout. The label must be in color and legible. Do not include bottles or vials with your application.
- For package labels, please provide the actual package container (collapse box before mounting) or a copy of the art layout. The label must be in color and legible.
- An API is the bulk drug substance (or raw material) that has not been processed into a final dosage form (e.g., tablet, capsule). CDER does not issue CPPs for intermediates or inactive ingredients (also known as excipients).
- For API CPP requests, the CPP will list the drug’s International Nonproprietary Name (INN) or National Nonproprietary name.
- Your application may be returned if the manufacturing facility is not registered and the pharmaceutical product is not listed pursuant to section 510 of the FD&C Act. Drug listing is required for approved drugs, OTC drugs, unapproved drugs, bulk APIs, and products for export only.
- Incomplete applications may be returned.
- FDA will not issue a CPP for products that do not meet the applicable requirements of the FD&C Act.
- Errors made by FDA during the preparation of CPPs will be corrected at no cost to the applicant, if requested within 45 days after issuance.
- Issuance of a CPP for CDER-regulated drugs will not preclude regulatory action by FDA, if warranted, against products covered by the CPP.

**CPP Requests for FDA Approved Drugs**

- Complete Form 3613f (sections 1, 2, 3, 4, 5, 6, 7, 8 and 9).
- Provide a copy of the FDA approval letter and/or supplemental letter.
- For drug products under the President’s Emergency Plan for AIDS Relief (PEPFAR), include a copy of the full or tentative approval letter.
- You are required to provide the following attachments: FDA-approved container label, package label, and package insert.
- You may include additional documents for attachment such as a drug formulation page or other information required by the importing country.
- Complete and sign exporter’s certification statement and authorization to release statement.
- Complete and sign certification statement for foreign manufacturing facilities, if applicable.

**CPP Requests for OTC Drug Products**

- Complete Form 3613f (sections 1, 2, 3, 4, 5, 6, 7, 8 and 9).
- You are required to provide the following attachments: container label that complies with the requirements of the applicable OTC monograph.
- You may include additional documents for attachment, such as a drug formulation page or other information required by the importing country.
- Complete and sign exporter’s certification statement and authorization to release statement.
- Complete and sign certification statement for foreign manufacturing facilities, if applicable.

**CPP Requests for APIs**

- Complete Form 3613f (sections 1, 3, 4, 6, 7, 8 and 9).
- You are required to provide the following attachment: package or container label that complies with the labeling requirements of 21 Code of Federal Regulations (CFR) 201.122.
- You may include additional documents for attachment, such as a drug formulation page or other information required by the importing country.
- Complete and sign exporter’s certification statement and authorization to release statement.
- Complete and sign certification statement for foreign manufacturing facilities, if applicable.
- Complete and sign certification statement for unapproved drugs.

**CPP Requests for Unapproved Drugs**

- Complete Form 3613f (sections 1, 2, 3, 4, 6, 7, 8 and 9).
- You are required to provide the following attachments: container label and drug formulation page.
- You may include additional documents for attachment, such as ones containing other information required by the importing country.
- Complete and sign exporter’s certification statement and authorization to release statement.
- Complete and sign certification statement for foreign manufacturing facilities, if applicable.
- Complete and sign certification statement for unapproved drugs.

This section applies only to requirements of the Paperwork Reduction Act of 1995.

**\*DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF ADDRESS BELOW.\***

The burden time for this collection of information is estimated to average 1 hour per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, to:

Department of Health and Human Services  
Food and Drug Administration  
Office of Chief Information Officer  
Paperwork Reduction Act (PRA) Staff  
[PRASStaff@fda.hhs.gov](mailto:PRASStaff@fda.hhs.gov)

*“An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number.”*