

FOOD SUPPLEMENTS (DIRECTIVE 46/2002 EU) AND NATIONAL REGULATION ON FOOD SUPPLEMENTS (K. Δ . Π . 449/2004)

NOTIFICATION OF DISTRIBUTION OF FOOD SUPPLEMENTS IN CYPRUS

Director of Medical and Public Health Services Ministry of Health Cyprus (Attn: Head of Public Health Services) Prodromou 1 street, 1449 Nicosia

Name: Address: Company name *: Company address*: dentity Card No / Company Registration No*: Telephone: Fax: Product(s) name(s):
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Telephone:Fax: Email: Product(s) name(s):
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This Notification should be accompanied by the following:
This Notification should be accompanied by the following:
 Copy of the products exterior label, including a copy of the Greek label. Copy of any direction circular, information leaflets and advertising texts. Proof of legal production and/or sale of food supplement in EU Member State/s.
Any revised data concerning the product(s) must be notified to the Director.
Signature: Date:
Name of signatory: