



**REQUEST FOR THE SUPPLY OF UNREGISTERED PRODUCT
TO REGISTERED WHOLESALER OR VETERINARIAN
UNDER APVMA PERMIT**

**Product name: Equine Metronidazole Paste (1L)
Permit number: PER94069**

Part 1: MANUFACTURER

COMPANY AND PRODUCT DETAILS	
Permit Holder and Manufacturer	Randlab Australia Pty Ltd
Product Name	
APVMA Permit Number	
Approved Use	

TO BE COMPLETED BY RANDLAB PTY LTD	
Supplied to (tick appropriate box)	Wholesaler <input type="checkbox"/> Veterinarian <input type="checkbox"/>
Name of supplied Wholesaler/Vet	Wholesaler: _____ and/or, Vet: _____
Date Supplied	
Invoice Number	
Quantity Supplied	
Batch Number	
Manufacture Date	
Expiry Date	

Part 2: WHOLESALE SUPPLIER

TO BE COMPLETED BY THE WHOLESALE SUPPLIER	
The supplier and the prescribing veterinarian must also keep copies of this record	
Wholesaler Details	
Name of Supplied Veterinarian	
Veterinary Practice or Trading Name	
Street Address	
Date Supplied	
Batch Number Supplied	
Date of Manufacture	
Expiry Date	
Quantity Supplied	



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Part 3: REGISTERED VETERINARIAN

Continued supply of this product (Equine Metronidazole Paste) is dependent on meeting the APVMA data collection requirements by completing and returning this form to Randlab.

TO BE COMPLETED BY THE REGISTERED VETERINARIAN	
The supplier and the prescribing veterinarian must also keep copies of this record	
Name of Supplied Veterinarian	
Veterinarian Registration Number	
Veterinary Practice or Trading Name	
Street Address	
Date Received	
Batch Number Supplied	
Expiry Date	
Quantity Supplied	
Type of cases this product is to be used for, including any diagnoses.	

PLEASE RETURN A COPY OF THE COMPLETED FILE BY EMAIL TO info@randlab.com.au

For any enquiries or further information about this product or permit, please contact Dr Michael Robinson on 0451481050 or mrobinson@randlab.com.au