

PROFORMA OF AFFIDAVIT OF QUALIFIED / COMPETENT PERSON FOR WHOLESALE TRADE

(ALLOPATHY)

Before the NOTARY PUBLIC AT _____

(AFFIDAVIT)

I Sri / Smt. _____ Son of
_____ aged about _____ years, by
caste _____ residing at _____ do
hereby solemnly affirm & declare as follows: -

- 1.) THAT, I am a citizen of India by birth / by registration
at _____.
- 2.) THAT, I have worked at M/s _____ situated at
_____ from _____ to _____
as a salesman and gathered sufficient experience in selling modern medicine.
- 3.) THAT, I have been appointed as a Competent Person on whole time basis in M/s
_____ having its address at _____ - with effect from _____.
- 4.) THAT, I am not attached anywhere else as a Competent Person except in the firm of M/s
_____ situated at _____ with effect from _____.
- 5.) THAT, I am not attached anywhere else as a Pharmacist / competent person at present
but was engaged previously as a pharmacist / competent person / salesman in the firm of
M/s _____ situated at _____.
- 6.) THAT, in the event of my above statements are not correct, I shall be liable to all legal
consequences, if these declarations are found false so far as my ethical standards as a
Pharmacist / Competent Person is concerned.

(DE P O N E N T)

IDENTIFIED BY ME

ADVOCATE: