

H.P Pharmacy Council  
 Directorate of Health & Family Welfare, H.P  
 SDA, Commercial Complex,  
 Kasumpti, Shimla-171009

Language of affidavit from the applicant	New Registration
Instructions	
1. To be given on the Prescribed stamp papers.	2. To be attested by the Oath Commissioner or Public Notary/Executive Magistrate
3. Omit whichever is not applicable to the applicant	4. All matter to be typed (nothing to be hand written or filled)

AFFIDAVIT

I \_\_\_\_\_ son/daughter/wife of Sh. \_\_\_\_\_ age \_\_\_\_\_ yrs. resident of village/town \_\_\_\_\_ P.O. \_\_\_\_\_ Tehsil \_\_\_\_\_ Distt. \_\_\_\_\_ of Himachal Pradesh do hereby solemnly affirm and declare as under:

1. That I have never been convicted under any provision of the drugs and cosmetics act 1940 and rules, 1945 made there under and under pharmacy act 1948 and rules, anytime and anywhere.
2. That I am permanent resident of Himachal Pradesh as per the address given above.
3. That I am not registered with any state pharmacy council in India or anywhere.
4. That I am applying for the first time for my registration with Himachal Pradesh state pharmacy council with their office at the Directorate of Health and Family Welfare, Kasumpti, Shimla-9.
5. That I have passed my Degree/Diploma from \_\_\_\_\_ in the year \_\_\_\_\_.
6. That I am fully aware of the Rules and Regulations covered under the Pharmacy Act, 1948 and I shall abide by the same.
7. That I shall forthwith inform, the Himachal Pradesh State Pharmacy Council, in the event any change in the departmental or professional address.
8. That I undertake to cancel my registration in the event if any declaration given by me found to be false or my name found to be registered with other State Pharmacy Council anytime.

Deponent

Verification

I, the above said deponent further state on oath that the contents of the above affidavit are true to the best of my knowledge and nothing relevant has been cancelled there from and as such I verify the same.

Place \_\_\_\_\_ Dated \_\_\_\_\_

Deponent