

External User Guide

Modifying of Pharmaceutical Facility License

1. Service Overview

Enables customers to apply to change the registered location of a pharmaceutical facility of the following categories pharmacy, medical store, or medical store for re-export in order to move from one location to another.

2. Service Channel



Website

3. Service Target Audience



Facility

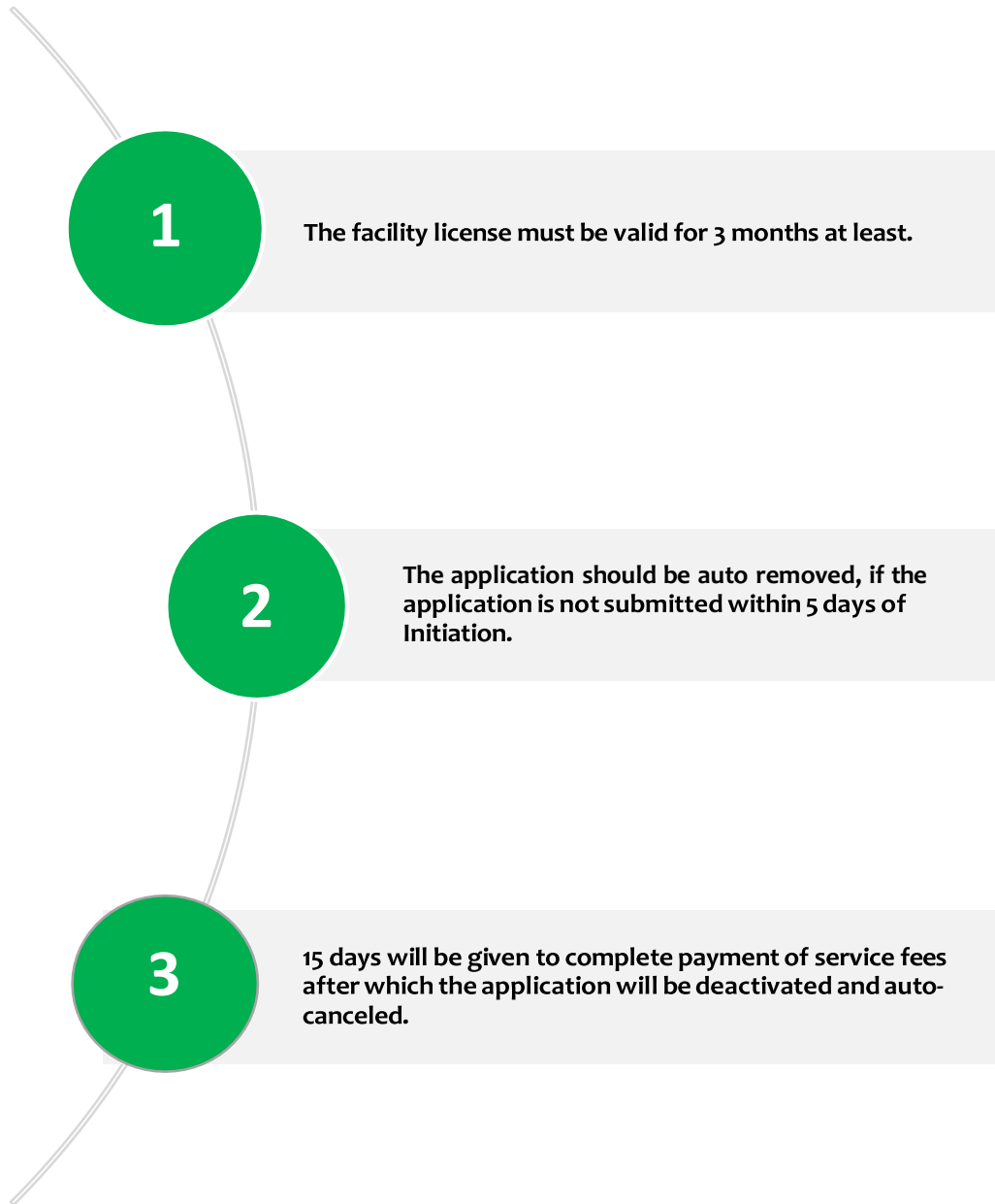
4. Service Outputs



Relocation Initial Approval letter.

Relocation Final Pharmaceutical Establishment License.

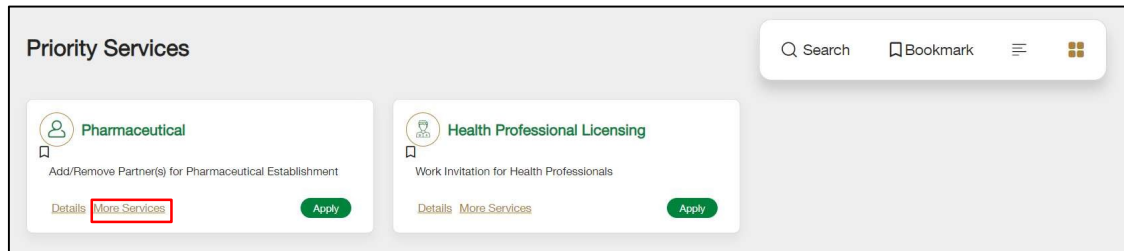
5. Service Prerequisites



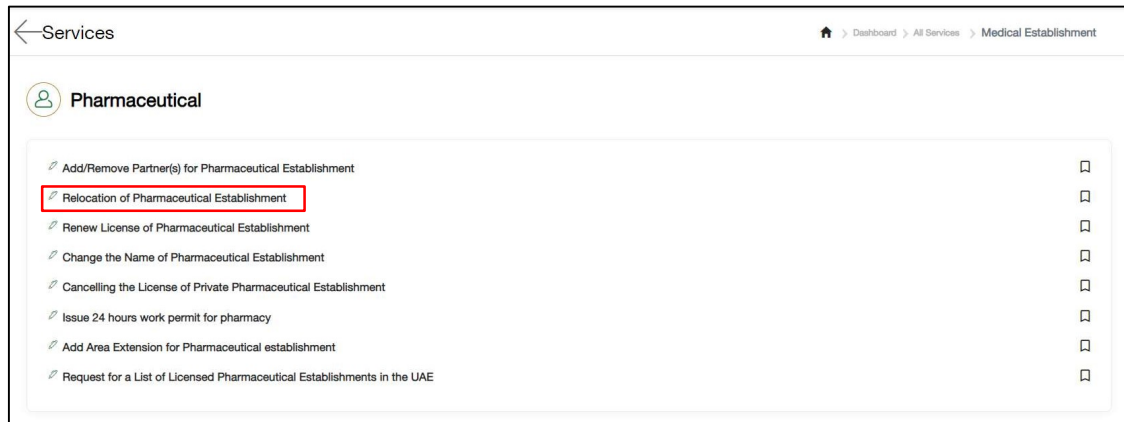
6. Submit Service Request

6.1 Initial Inspection

Open the form from the services list



Click on the “More Services”



Clicks on the apply for “Relocation for Pharmaceutical establishment” button.

Relocation of Pharmaceutical Establishment

Save & Close

Collapse All Expand All

Establishment Information

Contact Information

Location Information

Owner Details

Partner Details

Relocation of Pharmaceutical Establishment ->

Start the application by proceeding to “New Location Information”

Relocation of Pharmaceutical Establishment

Save & Close

Request Information

New Location Information Start

Self Evaluation

Complete Progress 0%

Application Form Attachments Preview

Show Footer

Fill in the new location information.


UNITED ARAB EMIRATES
MINISTRY OF HEALTH & PREVENTION


shakha_z@hotmail.com

Relocation of Pharmaceutical Establishment

Request Information

New Location Information

Emirate *
Emirate

Area *
Area

Street *
Street

Building Name *
Building Name

PO Box *
PO Box

Building NO. *
Building NO.

Google Map URL *
Google Map URL

Old Location Information

Building Name	Street	PO Box.	Google Map URL
Building Name	Street	PO Box.	Google Map URL
Emirates	Area	Building NO.	Google Map URL
Dubai	Industrial Park	10	

Next

Self Evaluation

Complete Progress
0%

Application Form

Attachments

Preview

Show Form

UNITED ARAB EMIRATES
MINISTRY OF HEALTH & PREVENTION

عربي
shaikha_x@hotmail.com

Relocation of Pharmaceutical Establishment
Services > Relocation of Pharmaceutical Establishment
Save & Close

Request Information

New Location Information

Self Evaluation

Description	Yes	No	N/A	Remark
No Data				

Note

- make sure to revise the ministry of health and prevention guidelines and requirements and apply them on the drawing plans and site based on the type of the facility.
- the drawing plans submitted shall be revised, stamped by engineering consultants and inserted in the standard ministry form.
- the initial approval is approval given for the site only and it does not include the approval on the detailed and internal divisions of the facility.
- the construction works, preparation, finishing in the facility shall be not done before getting the initial approval on the drawing plans.

☐ Disclaimer

Go To Attachment

i
Complete Progress
0%
Application Form Attachments Preview
Show Footer

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MINISTRY OF HEALTH & PREVENTION

عربي
shaikha_x@hotmail.com

Relocation of Pharmaceutical Establishment
Services > Relocation of Pharmaceutical Establishment
Save & Close

Request Information

Disclaimer

I am the undersigned, I work in the aforementioned pharmaceutical facility, I acknowledge according to this undertaking that all the information and data described above are correct and in conformity with reality and if it is proven otherwise, the Ministry of Health and Prevention has the right to take what it deems appropriate, knowing that all the conditions and standards required are explained and clarified to me by MOHAP inspectors.

I have read Ministerial Circular No. (932) for the year 2012 regarding the health and technical conditions that must be met in private pharmacies, and I will abide by what is stated therein.

Yes, I Understand

i
Complete Progress
0%
Application Form Attachments Preview
Show Footer

Upload the required attachment(s)

Relocation of Pharmaceutical Establishment

Request Information

Attachments Completed 0 of 3

Affection Plan Attested from the Municipality

Establishment Request Letter

Location Photos

Select Files from your computer
Use the "Button" below to upload your attachments
The supported file are: PDF, Word, JPG
File size: No more than 10MB

Browse For Attachments On Your Computer

Go To Preview

Complete Progress 67%

Application Form Attachments Preview

Show Footer

Preview the application and edit it if required.

Relocation of Pharmaceutical Establishment

Collapse All Expand All

Submit

New Building Information

Attachments

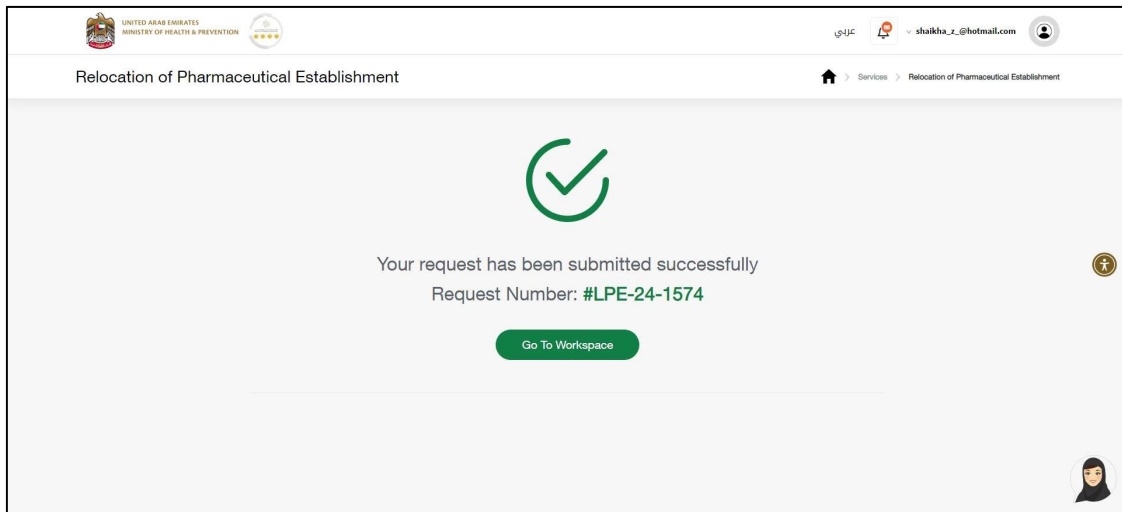
Submit

Complete Progress 100%

Application Form Attachments Preview

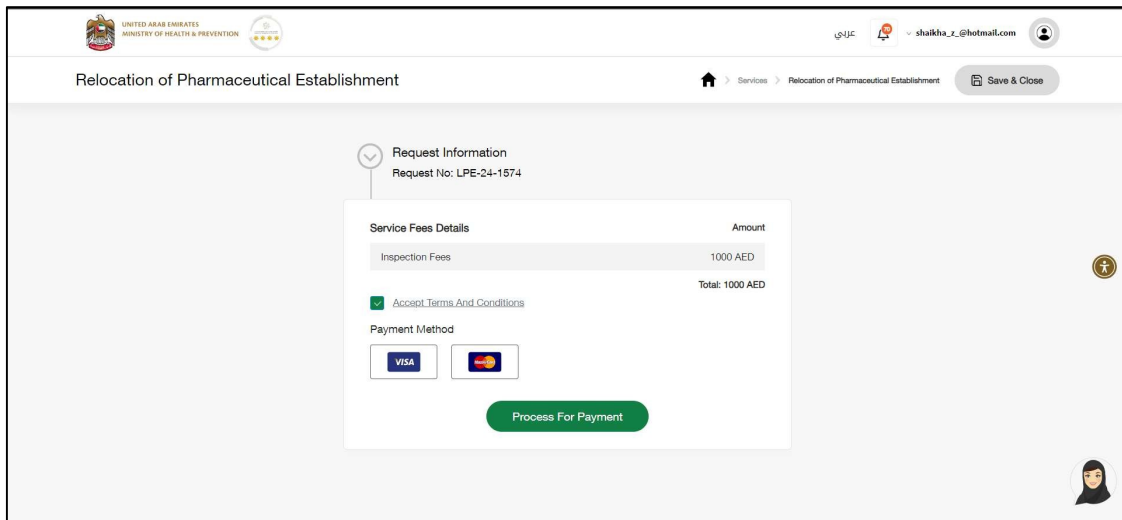
Show Footer

Submit the application.

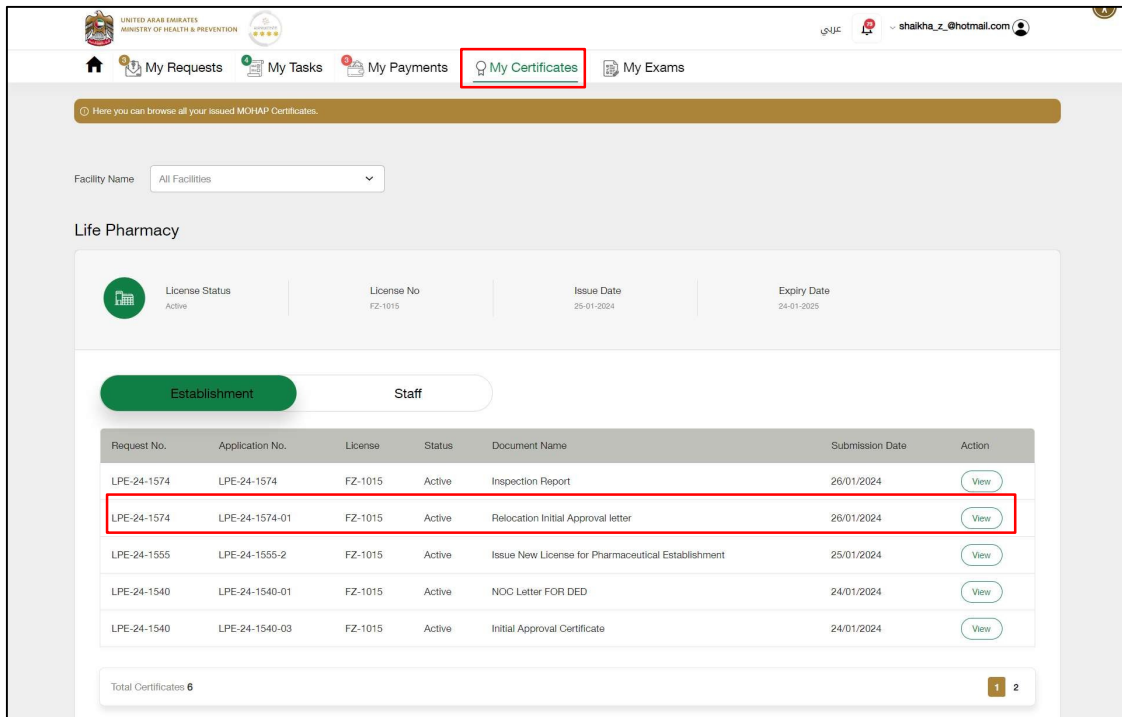
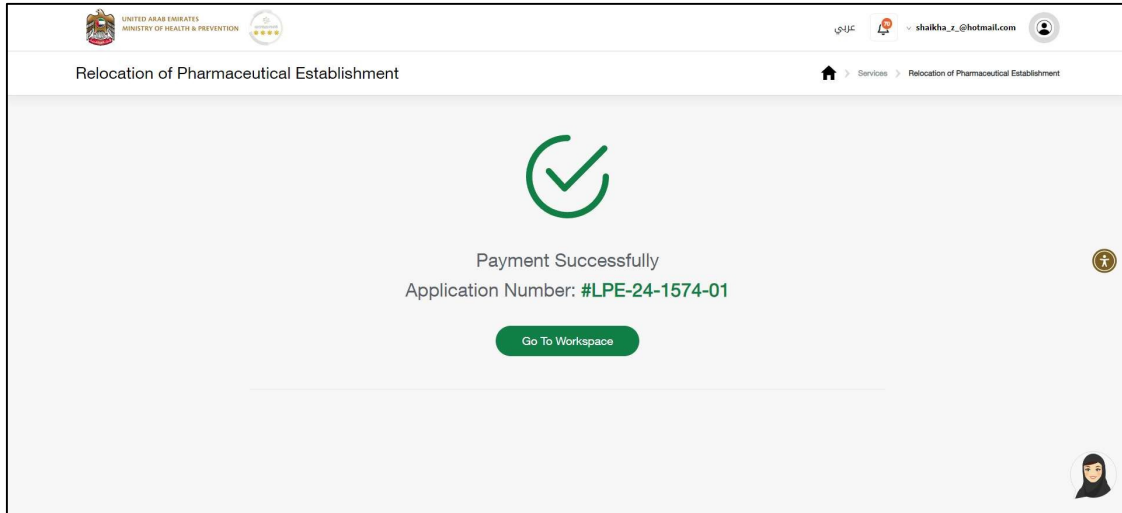


Confirmation that your request has been successfully submitted.

Make the payment for the inspection fee.



A confirmation for successful completion of payment.



After your request is approved, you can view and download the initial approval letter from My Certificate section.

6.2 Final Inspection

Upload the required attachment(s)

A confirmation that the application has been passed staff validation successfully and it will redirect you to the payment page.

Make the payment for the final inspection fee.

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Relocation of Pharmaceutical Establishment

Request Information
Request No: LPE-24-1574

Service Fees Details	Amount
Final Inspection	1000 AED
Total: 1000 AED	

☒ Accept Terms And Conditions

Payment Method

VISA MasterCard

Process For Payment

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MINISTRY OF HEALTH & PREVENTION

Relocation of Pharmaceutical Establishment

Payment Successfully

Application Number: #LPE-24-1574-01

Go To Workspace

A confirmation for successful completion of payment.

6.3 Final Approval

Upload the required document(s) and submit the application

Make the payment for the application fee

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Relocation of Pharmaceutical Establishment

Request Information
Request No: LPE-24-1574

Service Fees Details	Amount
Application Fees	100 AED
Total: 100 AED	

☒ Accept Terms And Conditions

Payment Method

VISA MasterCard

Process For Payment

Payment Successfully
Application Number: #LPE-24-1574-01

Go To Workspace

Make the payment for the service fee

Once approved, the applicant is required to pay a service fee to download the final approval certificate.

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MINISTRY OF HEALTH & PREVENTION

Relocation of Pharmaceutical Establishment

Request Information
Request No: LPE-24-1574

Service Fees Details	Amount
Service Fee	1000 AED
Total: 1000 AED	

☐ Accept Terms And Conditions

Payment Method

VISA MasterCard

Process For Payment

UNITED ARAB EMIRATES
MINISTRY OF HEALTH & PREVENTION

Relocation of Pharmaceutical Establishment

Payment Successfully

Application Number: #LPE-24-1574-01

Go To Workspace

A confirmation for successful completion of payment.

[Download the approval letter\(s\) or certificates](#)

you can download the certificate from the 'My Certificate' section.

