NA(CWC) LICENCE APPLICATION
FORM A.1: FOR ACTIVITIES INVOLVING SCHEDULE 1 CHEMICAL

GENERAL INSTRUCTIONS

♦ All relevant forms for this application must be submitted together with the NA(CWC) Licence Application Cover Form.

♦ All sections must be completed. Where not applicable, please specify “N.A.”. Any incomplete or illegible application will not be accepted.

♦ All forms must be duly endorsed with the signature of one of the licence applicants and date.

♦ A chemical at different concentration / purity should be submitted on separate forms.

♦ Please duplicate the form as required.

♦ This form may take you 20 minutes to fill in. You will need the following information to fill in the form:
  - Details of the Schedule 1 Chemical
  - Details of Product containing the Schedule 1 Chemical
  - MSDS or other necessary documents for the Schedule 1 Chemical

<table>
<thead>
<tr>
<th>FORMS</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form A.1</td>
<td>For Company / Organization engaging in activities involving Schedule 1 Chemical</td>
</tr>
</tbody>
</table>
### FORM A.1: DETAILS OF SCHEDULE 1 CHEMICAL AND PRODUCT CONTAINING SCHEDULE 1 CHEMICAL

<table>
<thead>
<tr>
<th>Details of Schedule 1 Chemical</th>
<th>Details of Product containing Schedule 1 Chemical</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Name of Chemical:</td>
<td>(2) Common Trade Name:</td>
</tr>
<tr>
<td>(3) CAS Registry No.:</td>
<td>(4) Percentage Purity (%):</td>
</tr>
<tr>
<td>(5) Chemical Structure:</td>
<td></td>
</tr>
</tbody>
</table>

(6) Has the MSDS and other necessary documents of this chemical been submitted with this application?

- Yes, the MSDS and other necessary documents are submitted. 
  Please specify any other documents that are submitted: ____

- No, reference to previous submission is provided. 
  Reference to previous submission must be within the past 3 years. 
  Please specify the year of submission: ____

(7) Applicant’s Signature: 

(8) Date (dd/mm/yyyy):

Please duplicate form as required.
### FORM A.1: ACTIVITIES INVOLVING SCHEDULE 1 CHEMICAL

(9) Please indicate the required activities for this application and provide the details accordingly:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Anticipated Quantity: µg</th>
<th>Specific purpose of...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Production</td>
<td></td>
<td>Specific purpose of production, indicating any final products formed:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Briefly describe the reaction procedure, indicating the type of reaction taking place or principle employed for the procedure:</td>
</tr>
<tr>
<td>Processing</td>
<td></td>
<td>Specific purpose of processing, indicating any final products formed and its purity:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Briefly describe the procedure and the principle employed for the procedure:</td>
</tr>
<tr>
<td>Consumption</td>
<td></td>
<td>Specific purpose of consumption, indicating any final products formed:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Briefly describe the reaction procedure, indicating the type of reaction taking place or principle employed for the procedure:</td>
</tr>
<tr>
<td>Storage</td>
<td></td>
<td>Specific eventual purpose of this chemical, indicating how would it be used:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Is this chemical from a previous stock?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ No □ Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Please specify the year that this stock was acquired: _____</td>
</tr>
</tbody>
</table>

Please duplicate form as required.
## Form A.1: Activities Involving Schedule 1 Chemical (Cont’d)

### Import
- **Anticipated Quantity:** \( \mu g \)
- Please indicate the probable countries where the chemical is to be imported from:

### Export
- **Anticipated Quantity:** \( \mu g \)
- Please indicate the probable countries where the chemical is to be exported to:

### Local Transfer / Distribution
- **Anticipated Quantity:** \( \mu g \)
- Please provide, below, the particulars of companies involved in any intended local sale / purchase / transfer / distribution:

1. **Name of local company:**
   - Contact Person:
   - **Contact No.:**
   - **Fax No.:**
   - **Company Address:**

2. **Name of local company:**
   - Contact Person:
   - **Contact No.:**
   - **Fax No.:**
   - **Company Address:**

### Overall purpose for use of Schedule 1 chemical:
- (a) [ ] For in-house usage or application
  - Please indicate purpose of in-house usage:
    - (i) [ ] Research
    - (ii) [ ] Medical
    - (iii) [ ] Pharmaceutical
    - (iv) [ ] Protective
    - (v) [ ] Production of other Schedule 1 Chemical

- (b) [ ] For further local distribution / sales

- (c) [ ] For further overseas distribution / sales

- (d) [ ] Others
  - Please specify: __________

### Applicant’s Signature: ____________

### Date (dd/mm/yyyy): ____________

Please duplicate form as required.