

Department of Agriculture, Food and the Marine

Application from a Veterinary Practitioner to the holder of an “Animal Remedies Wholesaler’s Cascade Licence” for release of an animal remedy for use in accordance with Regulation 18 of the European Communities (Animal Remedies) (No.2) Regulations 2007.

I, the undersigned, apply to the person specified at 2. below to release an animal remedy for use in accordance with Regulation 18 of the European Communities (Animal Remedies)(No.2) Regulations 2007.

1. PARTICULARS OF VETERINARY PRACTITIONER¹

(a) **Name:** _____

Address: _____

(b) **Registration No. with the
Veterinary Council of Ireland (VCI) ²:** _____

(d) **E-mail address:** _____

(e) **Telephone Number:** _____

**2. DETAILS OF LICENSED WHOLESALER IN THE REPUBLIC OF IRELAND
TO WHOM APPLICATION IS MADE³**

***(PLEASE ENSURE YOU REFER TO PAGE 3 OF THIS DOCUMENT RE.
SUPPLY)***

Name: Duggan Veterinary Supplies

Address: Unit 9, Thurles Retail Park, Thurles, Co. Tipperary. E41 E7K7



3. DETAILS OF ANIMAL REMEDY FOR WHICH APPLICATION IS MADE

- (a) **Name of Product:**
- (b) **Wholesaler’s Import Licence No. issued by the Department of Agriculture, Food and the Marine:**
- (c) **Quantity :** _____

4. PARTICULARS OF USE OF ANIMAL REMEDY

- (a) **Species :** _____
- (b) **Food Producing** **Yes** **No**
- (c) **Reason for application :** _____

1. I declare that the animal remedy which is the subject of this application will be used only in accordance with Regulation 18 of the European Communities (Animal Remedies) (No.2) Regulations 2007.
2. I hereby undertake that any animal remedy purchased by me from a Wholesaler licensed under the ‘Cascade’ will be labelled in accordance with Regulation 18(10) of the European Communities (Animal Remedies) (No.2) Regulations 2007.
3. I hereby undertake that any animal remedy purchased by me from a Wholesaler licensed under the ‘Cascade’ will be stored separately from other animal remedies.
4. I hereby undertake not to display, offer or expose the Animal Remedy for sale.



5. I hereby undertake to notify any adverse reactions **immediately** to; veterinarymedicinesWMC@agriculture.gov.ie.
6. I hereby undertake to return any unused animal remedies purchased by me from a wholesaler under the ‘Cascade’ to the wholesaler concerned no later than **1 year** from the date of receipt of such animal remedy.
7. I will be fully and directly responsible for use of the animal remedy covered by this application and that no liability shall attach to the Minister for Agriculture, Food and the Marine for any adverse events which may arise in the treated animal(s).

¹In the case of a group practice, an application may be made in respect of the practice – in such a case the application may be signed by a member who is authorised by the practice to give legal undertakings on its half – alternatively each member may sign – in either case, each veterinary practitioner will be individually responsible for use of products under the Cascade and provide records to show each individual use.

²Registration with the VCI must include the premises where the animal remedy is used/stored.

³ The animal remedy, the subject of this application, may only be supplied by the holder of a current “Animal Remedies Wholesalers Cascade Licence” granted by the Minister for Agriculture, Food and the Marine under Regulation 18(11) of the European Communities (Animal Remedies) (No.2) Regulations 2007.

It should be noted that information provided by you may be subject to disclosure under the FOI Acts 1997 and 2003. If you wish to have any of the records concerned protected under the Confidentiality, Commercially Sensitive, Personal Information or other exemption provisions of that legislation you should mark those records accordingly and state your reasons. The relevant exemptions will then be considered in the event of an FOI request relating to those records.

<p>SIGNATURE OF APPLICANT¹ : _____</p> <p>_____</p> <p>NAME IN BLOCK CAPITALS: _____</p> <p>_____</p> <p>DATE : _____</p>

This form, when completed, should be forwarded to:

The Licensed Wholesaler Concerned:
Duggan Veterinary Supplies Ltd.,
Unit 9, Thurles Retail Park, Thurles,
Co. Tipperary, E41 E7K7
P: 0504 43169 **E:** sales@dugganvet.ie

