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| CONFIRMATION OF AUDIT BOOKING FORMForm: FM\_MQL23 |

**IMPORTANT: To be completed and signed by the AUDITOR and submitted to the APVMA as soon as possible after the audit is booked.**

***Email:*** ***MLS@apvma.gov.au***

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| 1. Name of manufacturer to be audited.
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| 1. Street address of manufacturer to be audited
 |  |
| 1. Audit owner (if overseas site)
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| 1. **Licence/File No.**
 |  | 1. **Date/s of audit.**
 |  |
| 1. Type of Audit: *(Tick appropriate*)
 | [ ]  **FULL - Initial**[ ]  **FULL - Subsequent**[ ]  **Extension of licence  scope** | 1. **Category(ies) of manufacture to be audited.**
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| 1. **Auditor/s (for this audit)**
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| 1. **Other sub-contractors and/or facilities to be audited *(if included, or to be included on licence):***
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**Comments:**

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| **Privacy***The collection of personal information by the Australian Pesticides and Veterinary Medicines Authority (APVMA) in relation to this form is for the purpose of assisting the APVMA to perform its functions under the Agricultural and Veterinary Chemicals (Administration) Act 1992 and related legislation, including for the purpose of processing audits and audit outcomes.**Personal information collected by the APVMA will be managed in accordance with the Privacy Act 1988.**More information about the way in which the APVMA manages personal information, including its Privacy Statement, is available at* [*https://apvma.gov.au/node/3207*](https://apvma.gov.au/node/3207)**Auditor’s Declaration:** I declare that I have not provided GMP consultancy services to this company within the past three (3) years, and have had no dealings, nor have any personal or business financial interests that could be considered a conflict of interest with this company (as defined in the Accreditation Deed).**Signature of Auditor:** ………………………………………………. **Date:** ……………………. |