

**U.S. DEPARTMENT OF JUSTICE – DRUG ENFORCEMENT ADMINISTRATION**  
**APPLICATION FOR PERMIT TO EXPORT CONTROLLED SUBSTANCES**  
**FOR SUBSEQUENT REEXPORT**  
**PURSUANT TO SECTION 1003(f), Title III, PL 109-57**  
(See Instructions and Privacy Act Information)

|  |   |  |              |
|--|---|--|--------------|
| DATE:  |   | EXPORTER APPLICATION NUMBER (If applicable)  |              |
| 1. NAME OF CONSIGNEE IN FIRST COUNTRY  |   | 2. ADDRESS OF CONSIGNEE IN FIRST COUNTRY   |              |
| 3. BUSINESS OF CONSIGNEE IN FIRST COUNTRY  |   | 4. FOREIGN PORT OF ENTRY (City & Country)  |              |
| 5a. PORT OF EXPORTATION (City & state of last U.S. Customs port)   | 5b. NAME OF EXPORTING CARRIER OR VESSEL (Air, Ship)   | 5c. APPROX. DATE OF EXPORTATION  |              |
| 6. FOREIGN IMPORT LICENSE OR PERMIT NO.  |   | ISSUE DATE:  | EXPIRE DATE: |
| 7a. NAME AND QUANTITY OF DRUG OR PREPARATION TO BE EXPORTED (Enter names as shown on labels; numbers and sizes of packages; bulk or tablets/capsules, strength of tablets, capsules, etc, CSA Drug Code, and NDC Number) | 7b. CONTROLLED SUBSTANCE CONTENT OF DRUG OR PREPARATION TO BE EXPORTED expressed as acid, base, or alkaloid (Enter name of controlled substance contained in the drug, compound, or preparation.) | 7c. DATE RELEASED AND ACTUAL QUANTITY (Completed and signed by registrant at time of export and returned within 30 days to DEA.) |              |
|  |   | DEA PERMIT NO:   |              |
|  |   | DATE ACTUALLY SHIPPED:   |              |
|  |   | SIGNATURE OF RESPONSIBLE COMPANY OFFICIAL:   |              |
| 8a. NAME OF CONSIGNEE IN SECOND COUNTRY  | 8b. ADDRESS OF CONSIGNEE IN SECOND COUNTRY  | 8c. AMOUNT TO BE REEXPORTED TO SECOND COUNTRY (Enter name of controlled substances (7b) and net weight in gms)                   |              |

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**APPLICATION FOR PERMIT TO EXPORT CONTROLLED SUBSTANCES  
FOR SUBSEQUENT REEXPORT (page 2)**

|  |   |   |
|--|---|---|
| 9a. NAME OF CONSIGNEE IN SECOND COUNTRY  | 9b. ADDRESS OF CONSIGNEE IN SECOND COUNTRY  | 9c. AMOUNT TO BE REEXPORTED TO SECOND COUNTRY (Enter name of controlled substances (7b) and net weight in gms)  |
| 10a. NAME OF CONSIGNEE IN SECOND COUNTRY | 10b. ADDRESS OF CONSIGNEE IN SECOND COUNTRY | 10c. AMOUNT TO BE REEXPORTED TO SECOND COUNTRY (Enter name of controlled substances (7b) and net weight in gms) |
| 11a. NAME OF CONSIGNEE IN SECOND COUNTRY | 11b. ADDRESS OF CONSIGNEE IN SECOND COUNTRY | 11c. AMOUNT TO BE REEXPORTED TO SECOND COUNTRY (Enter name of controlled substances(7b) and net weight in gms)  |

PLEASE ATTACH ADDITIONAL SHEETS OF FORM DEA 161R OR DOCUMENTATION PER TITLE 21 CFR 1312.22.

**AFFIDAVIT**

To the best of my knowledge and belief (1) both the first country to which the controlled substance(s) are exported from the United States and the second country to which the controlled substances are exported are parties to the Single Convention on Narcotic Drugs, 1961, and the Convention on Psychotropic Substances, 1971; (2) the first and second countries have each instituted and maintain a system for the control of these substances; (3) the drugs will be consigned to a holder of such permits or licenses as may be required in the country of import and that a permit or license for importation will be issued for such import into the second country; (4) **that the controlled substances will be reexported from the first country to the second country no later than 180 days after exportation from the United States;** (5) the packages are labeled in conformance with the Single Convention on Narcotic Drugs, 1961 and the Convention on Psychotropic Substances, 1971, and any amendments to these treaties; (6) the controlled substances are to be applied exclusively to medical, scientific, or other legitimate uses within the second country; and (7) the controlled substances will not be exported from the second country.

|                          |                                 |   |
|--------------------------|---------------------------------|---|
| NAME OF EXPORTER         |                                 | ADDRESS OF EXPORTER   |
| EXPORTER'S TELEPHONE NO. | EXPORTER'S DEA REGISTRATION NO. | PRINTED NAME & SIGNATURE AND TITLE OF PERSON MAKING APPLICATION |

**NOTICE: Controlled Substances may not be exported by mail or parcel post.**

|                     |                               |                                  |
|---------------------|-------------------------------|----------------------------------|
| <b>DEA USE ONLY</b> | APPROVED EXPORT PERMIT NUMBER | DATE EXPORT PERMIT NUMBER ISSUED |
|---------------------|-------------------------------|----------------------------------|