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| **Form** | | |
| **Technical validation** | | |
| **Identification number:** | OS000\_00\_001 |
| **Version:** | 1.2 |
| **Valid from:** | 19.07.2023 |

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This form can be **optionally used** when submitting an eCTD sequence to Swissmedic.

Product (trade name): °°°°°

eCTD sequence number: °°°°°

Marketing authorisation number (if known): °°°°°

**Information on technical validation:**

What errors occurred during validation?

Fail\*: Submissions containing fail criteria not possible

Best practice\*\*: °°°°°

\* Please be aware that fail criteria will result in the submission being rejected

\*\* Best practice criteria will only result in a rejection if they make uploading impossible or materially restrict the review of the submission. Correction of best practice criteria is generally recommended.

Additionak comments: °°°°°

Person in charge:

Name °°°°°°

First Name °°°°°

Function °°°°°°

Telephone °°°°°

E-mail °°°°°°

Change history

| **Version** | **Change** | **sig** |
| --- | --- | --- |
| 1.2 | New layout, no content adjustments to the previous version. | dei |
| 1.1 | Formal adjustments to the header and footer  No content adjustments to the previous version. | dei |
|  | Change of document name | mra |
| 1.0 | New QM ident (old ident: SU000\_00\_005f\_FO) | wis |
|  | Change of document name  Simplification of the document  Form is no longer mandatory | wja |
|  | Telephone and fax number in the footer updated, new change history inserted in the document, document name modified in the header | sel |