

PUNJAB STATE PHARMACY COUNCIL

Timing for submission of application:- 10:00 AM to 1:00P.M & 2:00 PM to 3:00 PM  
REQUIREMENTS FOR '**DUPLICATE REGISTRATION CERTIFICATE**' (DRC)

- (i) **IN CASE OF LOST ORIGINAL REGISTRATION CERTIFICATE (ORC) &**  
(ii) **IN CASE OF submission of Spoiled/ Mutilated/ Illegible Original Registration Certificate (ORC)**

(To be submitted in the office of the Registrar, Punjab State Pharmacy Council)

**1. Application in person.**

2.**Application** for Duplicate Certificate of Registration should be on simple paper with duly self attested photograph on Mat paper with plain background affixed on it.

3.Five **passport size photographs on Mat paper with plain background**-without attestation. All the Five photographs-(one on 'application' & others four)- should be similar

4. **Self Declaration.** (Date of birth should also be mentioned). (Specimen available in the office)- (in case of lost ORC only)

5.**F.I.R** regarding loss of Original Registration Certificate (ORC)- (in case of lost ORC only)

6.Self attested photocopy of **Matriculation Certificate** (showing date of birth)- (in case of lost ORC only)

7. Self Attested photocopy of **10+2 Certificate**- (in case of lost ORC only)

8. (i) **Detail Marks of 1<sup>st</sup> Year to Final Year of Diploma in pharmacy Original** (along with two self attested photocopy sets) and

(ii) **Detail Marks of Final Year of Degree in pharmacy in Original** (alongwith two self attested photocopy sets of detail marks from 1<sup>st</sup> year to Final year). **Note:-** The Institution and the passing out session should be approved by the Pharmacy Council of India & AICTE, DELHI- (in case of lost ORC only)

9. Self Attested photocopy of **Original Registration Certificate.**

10.Spoiled/Mutilated/Illegible Original Registration Certificate (**ORC**)- (in case of Spoiled ORC only)

11.One self attested photocopy of **Adhaar Card or DL or Passport .**

12.The **required fee** in case of lost  
1<sup>st</sup> time Rs. 3100/- (3000+100)  
2<sup>nd</sup> time Rs 5100/- (5000+100)  
3<sup>rd</sup> time Rs.7100/- (7000+100)

The **required fee** in case of spoiled  
Rs. 1600/- (1500+100)

**Note:- All the Photostat copies should be clear, visible, legible & attested.**

**Note:-** In case the application has to be submitted for Restoration, Renewal and for Issuance of DRC, Form 'L'(available in the office) should also be filled alongwith the above documents.

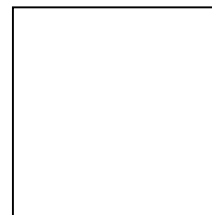
**INCOMPLETE CASE WILL NOT BE RECEIVED BY THE OFFICE.**

By order

REGISTRAR  
PUNJAB STATE PHARMACY COUNCIL

**SPECIMEN OF SELF DECLARATION FOR 'DUPLICATE REGISTRATION'  
IN CASE OF LOST**

**To be submitted before the Registrar Punjab State Pharmacy Council**



I \_\_\_\_\_ S/o,D/o Father Sh. \_\_\_\_\_ Mother  
Smt. \_\_\_\_\_ R/o \_\_\_\_\_  
\_\_\_\_\_ do here by solemnly declare as under:-

1. That I am a domicile of Punjab being permanent resident of Vill. \_\_\_\_\_  
\_\_\_\_\_ Tehsil \_\_\_\_\_  
\_\_\_\_\_ Distt. \_\_\_\_\_ in Punjab State.

2. That I have passed Matriculation Examination from (School, Place & Board Name) \_\_\_\_\_ Tehsil  
\_\_\_\_\_ Distt. \_\_\_\_\_ in the  
year/session \_\_\_\_\_.

3. That I have passed 10+2 Examination from (School, Place & Board Name) \_\_\_\_\_  
Tehsil \_\_\_\_\_ Distt. \_\_\_\_\_ in the Year/Session \_\_\_\_\_ and I have already  
completed 18 year of age.

4. That I have passed my Diploma/Degree in Pharmacy from \_\_\_\_\_  
\_\_\_\_\_ Distt. \_\_\_\_\_  
State \_\_\_\_\_ in the year/session \_\_\_\_\_.

5. I have undergone practical training (Industrial) in (Name of Hospital/Dispensary, Place) \_\_\_\_\_  
\_\_\_\_\_ in Tehsil \_\_\_\_\_ of Distt. \_\_\_\_\_.

6. That I am registered with Punjab State Pharmacy Council vide Registration No. \_\_\_\_\_  
dated \_\_\_\_\_.

7. That I have lost my Registration Certificate at (Specific place) \_\_\_\_\_ in  
city or Village \_\_\_\_\_  
Distt. \_\_\_\_\_ on dated \_\_\_\_\_.

8. That I am applying for the '**Duplicate Registration Certificate**' for the First/Second/third  
time.

9. I undertake that I shall never retain two Certificates at one time and if I found guilty of this  
offence my Registration may be cancelled straightway and if the Original Certificate is trace out  
somehow I will deposit back immediately any one of the two Certificates in the office of the  
Registrar, Punjab State Pharmacy Council, Medical Education Bhawan, Sec-69, Mohali by  
coming personally or by registered post within a week.

10. I undertake that my registration as Pharmacist may be cancelled if I am found guilty of any  
offence according to the Pharmacy Act, 1948 as amended and State Pharmacy Council Rules,  
1951. I agree that I shall follow the Rules of Punjab Pharmacy Council, which may be laid down  
for the guidance of registered pharmacists from time to time.

**VERIFICATION**

**DEPONENT**

I the above said deponent further declare that the above given statement is true to  
the best of my knowledge and belief.

Dated: - \_\_\_\_\_

**DEPONENT**

**PUNJAB STATE PHARMACY COUNCIL**

Timing for submission of application:- **10:00 AM to 1:00 PM & 2:00 PM to 3:00 PM**  
**REQUIREMENTS FOR 'DUPLICATE REGISTRATION CERTIFICATE' (DRC)**  
**IN CASE OF GOOD STANDING CERTIFICATE ISSUED EARLIER**  
(To be submitted in the office of the Registrar, Punjab State Pharmacy Council)

1. **Applicant in person.**
2. **Application for Duplicate of Registration** should be on simple paper regarding the period of his visit in Foreign & detail of return in India with duly self attested photograph on Mat paper with plain background affixed on it.
3. **Self Declaration** (Date of birth should also be mentioned). (Specimen available in the office).
4. **Three similar passport size photographs on Mat paper with plain background:-**
  - i) One attested from front side.
  - ii) Two (without attestation).
5. Two self attested photocopies of **Matriculation Certificate** (Showing date of birth).
6. (i) **Detail Marks of 1<sup>st</sup> Year to Final Year of Diploma in pharmacy Original** (along with two self attested photocopy sets) and  
(ii) **Detail Marks of Final Year of Degree in pharmacy in Original** (along with two self attested photocopy sets of detail marks from 1<sup>st</sup> year to Final year). **Note:-** The Institution and the passing out session should be approved by the Pharmacy Council of India & AICTE, DELHI.
7. Two self attested photocopies of **Original Registration Certificate** (if available).
8. Two self attested photocopies of **Adhaar Card or DL or Passport.**
9. **Fee:- Rs.3100/-** (3000+100)

**Note:- All the Photostat copies should be clear, visible, legible & attested.**

**Note:-** In case the application has to be submitted for Restoration, Renewal and for Issuance of DRC, Form 'L'(available in the office) duly recommended by the Area Member should also be filled along with the above documents.

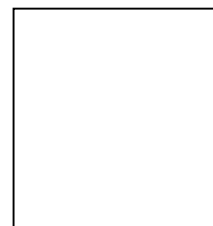
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By order

REGISTRAR  
PUNJAB STATE PHARMACY COUNCIL

**SPECIMEN OF SELF DECLARATION FOR 'DUPLICATE REGISTRATION' IN  
CASE OF GOOD STANDING CRTIFICATE ISSUED EARLIER**

**To be submitted before the Registrar Punjab State Pharmacy Council**



1. That I \_\_\_\_\_ S/o, D/o Father Sh. \_\_\_\_\_ Mother Smt. \_\_\_\_\_  
\_\_\_\_\_ R/o \_\_\_\_\_ do here by solemnly declare as under:-

2. That I am a domicile of Punjab being permanent resident of Vill. \_\_\_\_\_  
\_\_\_\_\_ Tehsil \_\_\_\_\_  
\_\_\_\_\_ Distt. \_\_\_\_\_ in Punjab State.

3. That I have passed Matriculation Examination from (School, Place & Board Name) \_\_\_\_\_  
\_\_\_\_\_ Tehsil \_\_\_\_\_  
\_\_\_\_\_ Distt. \_\_\_\_\_  
\_\_\_\_\_ in the year/session \_\_\_\_\_.

4. That I have passed 10+2 Examination from (School, Place & Board Name) \_\_\_\_\_  
\_\_\_\_\_ Tehsil \_\_\_\_\_  
\_\_\_\_\_ Distt. \_\_\_\_\_ in the Year/Session \_\_\_\_\_ and I have  
already completed 18 year of age.

5. That I have passed my Diploma/Degree in Pharmacy from \_\_\_\_\_  
\_\_\_\_\_ Distt. \_\_\_\_\_  
\_\_\_\_\_ in the year/session \_\_\_\_\_ and I have undergone practical training  
(Industrial) in (Name of Hospital/Dispensary, Place) \_\_\_\_\_  
\_\_\_\_\_ in Tehsil \_\_\_\_\_ of Distt. \_\_\_\_\_.

6. That I am registered with Punjab State Pharmacy Council vide Registration No. \_\_\_\_\_  
dated \_\_\_\_\_.

7. That on my request the **Good Standing Certificate** was issued in my favour for  
\_\_\_\_\_ vide letter No. \_\_\_\_\_ dated  
\_\_\_\_\_ after cancellation of my Original Registration Certificate.

8. That I have not migrated to \_\_\_\_\_ as of now & my permanent immigration may  
only take after almost \_\_\_\_\_ year/years.

**9. That I shall not allow the misuse of the 'Duplicate Registration Certificate' thus issued &  
will submit the same into the O/o Punjab State Pharmacy Council at Chandigarh whenever  
my immigration will takes place.**

10. I undertake that my registration as Pharmacist may be cancelled if I found guilty of any  
offence according to the Pharmacy Act, 1948 as amended and State Pharmacy Council, which  
may be laid down from time to time.

VERIFICATION

**DEPONENT**

I the above said deponent further declare that the above given statement is true to  
the best of my knowledge and belief.

Dated: - \_\_\_\_\_

**DEPONENT**