|  |  |
| --- | --- |
|  | Placing a food supplement on the market |
|  | Modifying the composition of the food supplement regarding the characteristic substances |

**1 NOTIFICATION SUBMITTED BY (tick the relevant option)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Manufacturer | Manufactured for | Importer | | Other party placing the product on the market | |
| Name (company, business name, etc.) | | | | | Business ID / VAT number |
|  | | | | |  |
| Delivery address | | | Postal code | | City/town |
|  | | |  | |  |
| Contact person | | | Domicile | | Country |
|  | | |  | |  |
| Phone number | | | E-mail | | |
|  | | |  | | |

**Authorised representative/agent (if different from above)**

|  |  |  |
| --- | --- | --- |
| Name (company, business name, etc.) | | Business ID / VAT number |
|  |
| Delivery address | Postal code | City/town |
|  |  |  |
| Contact person | Domicile | Country |
|  |  |  |
| Phone number | E-mail | |
|  |  | |

**Information for invoicing**  Paper invoice  E-invoice

|  |  |  |  |
| --- | --- | --- | --- |
| Name (company, business name, etc.) | | Business ID / VAT number | |
|  | |
| Delivery address | Postal code | City/town | |
|  |  |  | |
| Contact person | Additional information to the invoice (e.g. PO-number) | | |
|  |
| E-invoicing address /EDI-number | E-invoicing operator | | Operator code |
|  |  | |  |

**2 INFORMATION ON FOOD SUPPLEMENT**

|  |
| --- |
| Name of the food |
|  |
| Brand name |
|  |
| The names of the categories of nutrients/substances that characterise the product or an indication of the nature of those nutrients/substances |
|  |
| Purpose of use |
|  |

1 Decree on Food Supplements, Maa- ja metsätalousministeriön asetus ravintolisistä 78/2010

|  |  |  |
| --- | --- | --- |
| List of ingredients (Ingredients and additives according to weight in descending order, reference to attachment is not enough) | | |
|  | | |
| Recommended daily dose | | Content quantity |
|  | |  |
| Substances that characterize the food supplement and their amounts in daily dose (reference to attachment is not enough) | | |
|  | | |
| Country of origin | Alcohol content | Minimum storage time (= period between the manufacture and the best before date, e.g. 2 yrs 6 mths) |
|  |  |  |
| Storage instructions | | |
|  | | |
| Warning statements in accordance with the Food Supplement Decree (78/2010) | | |
|  | | |
| Other possible warning statements | | |
|  | | |
| More information | | |
|  | | |

**3 ATTACHMENTS**

|  |  |
| --- | --- |
| Labelling model in Finnish and Swedish (obligatory) | |
| Power of attorney (representative/agent) \* | |
| Other attachment (please specify): |  |

**4 SIGNATURE**

|  |  |
| --- | --- |
| Place and date | Signature/signatures and Name/names in block letters |
|  |  |

\* If the person(s) signing the notification Is / are not authorized to sign for the company, a power of attorney must be attached.

  Send the notification

* by mail to the address: Finnish Food Authority/Registry Office, P.O. Box 200, FI-00027 FINNISH FOOD AUTHORITY, Finland
* by e-mail: [kirjaamo@ruokavirasto.fi](mailto:kirjaamo@ruokavirasto.fi)

A fee is charged for the receipt of the notification in accordance with the Decree by the Ministry of Agriculture and Forestry on services by the Food Authority subject to a fee.