1 THE NOTIFICATION IS MADE BY

|  |  |  |
| --- | --- | --- |
| [ ]  Manufacturer | [ ]  Manufactured for | [ ]  Importer |
| Name of the enterprise  | Business ID |
|       |       |
| Delivery address | Postal code | City/town |
|       |       |       |
| Municipality where the enterprise is located | Country |
|       |       |
| Contact | Place of business |
|       |       |
| Telephone | E-mail address |
|       |       |

**Person in charge/authorised representative (if different from above)**

|  |  |
| --- | --- |
| Name (enterprise, trade name or similar) | Business ID |
|       |       |
| Delivery address | Postal code | City/town |
|       |       |       |
| Municipality where the enterprise is located | Country |
|       |       |
| Contact | Place of business |
|       |       |
| Telephone | E-mail address |
|       |       |

2 INFORMATION ON THE FOOD

|  |
| --- |
| Commercial brand name |
|       |
| Name of the food |
|       |
| Country of origin |
|       |
| Disease, disorder or medical condition for the dietary management of which the product is intended |
|       |
| List of ingredients (ingredients and additives according to weight in descending order) |
|       |

**Nutrition labelling** (the quantities apply to the formula ready for use)

|  |  |  |
| --- | --- | --- |
| Notification of nutritional content | [ ]  /100 g | [ ]  /100 ml |
| Energy |       kJ |       kcal |
| Fats |       g |
| * Saturated fats
 |       g |
| Carbohydrates |       g |
| * Sugars
 |       g |
| Protein |       g |
| Salt |       g |

|  |  |  |
| --- | --- | --- |
| **Quantities of vitamins and minerals** (the quantities apply to the product ready for use) | [ ]  **/100 kJ** | [ ]  **/100 kcal** |
| **Vitamins** | **Minerals** |
| [ ]  Vitamin A |       | μg RE | [ ]  Calcium |       | mg |
| [ ]  Vitamin D |       | μg | [ ]  Magnesium |       | mg |
| [ ]  Vitamin E |       | mg α-TE | [ ]  Iron |       | mg |
| [ ]  Vitamin K |       | μg | [ ]  Copper |       | μg |
| [ ]  Thiamine |       | μg | [ ]  Iodine |       | μg |
| [ ]  Riboflavin |       | μg | [ ]  Zinc |       | mg |
| [ ]  Niacin |       | mg NE | [ ]  Manganese |       | μg |
| [ ]  Pantothenic acid  |       | mg | [ ]  Sodium |       | mg |
| [ ]  Vitamin B6 |       | μg | [ ]  Potassium |       | mg |
| [ ]  Folate |       | μg-DFE | [ ]  Selenium |       | μg |
| [ ]  Vitamin B12 |       | μg | [ ]  Chromium |       | μg |
| [ ]  Biotin |       | μg | [ ]  Molybdenum |       | μg |
| [ ]  Vitamin C |       | mg | [ ]  Fluoride |       | mg |
|  |  |  | [ ]  Chloride |       | mg |
|  |  |  | [ ]  Phosphorus |       | mg |

|  |
| --- |
| Other nutrients or components, the declaration of which is necessary for the appropriate intended use of the product |
|       |

|  |
| --- |
| Age group for which the product is intended  |
|       |

|  |
| --- |
| **More information** (e.g. instructions for use and storage, warnings, contra-indications etc.) |
|       |

3 ATTACHMENTS

|  |
| --- |
| **Model of the labelling to be used on the product (in Finnish and Swedish)** |
| [ ]  Model of the labelling |
| [ ]  Power of attorney (agent)\* |

4 SIGNATURES

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

\* If the signatory/signatories to the notification is/are not authorised to act as an agent for the enterprise, a power of attorney has to 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

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.