

TGA USE ONLY

This form, when completed, will be classified as 'For official use only'.

For guidance on how your information will be treated by the TGA see: Treatment of information provided to the TGA at https://www.tga.gov.au/treatment-information-provided-tga>.

Notification: Change of sponsor name¹



- This form is to be completed by sponsors who have changed their name, but the ABN and ACN has not changed.
- If the ABN or CAN has changed, sponsors will be required to complete the Organisation details form to generate a new client ID, and then complete the Notification: Transfer of sponsorship form.
- There is **no fee** required for this notification.
- Please ensure you read <u>Changes of sponsorship to the rapeutic goods</u> prior to completing and submitting this form.

Send completed forms to the TBS Helpdesk at: Email: sponsortransfers@tga.gov.au

Post: PO Box 100 Woden ACT 2606 ABN: 40 939 406 804

Phone: 1800 020 653 Fax: 02 6203 1605 Email: info@tga.gov.au https://www.tga.gov.au

Reference/Publication #

¹ See regulations 10AC (in relation to registered and listed therapeutic goods), 10FA (in relation to medical devices) and 10HA (in relation to biologicals).

Section 1 – Details of notification

Type of notification

Where you have changed your name:					
Where you, as a company, have amalgamated with another company, and as a result changed your name:					
Date of name cha	nge				
Your former name: (as sponsor)					
TGA Client ID:					
New name of the sponsor:					
Postal address					
Email address					

Notification: Change of sponsor name (May 2024)

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Section 2 – Declarations



- Please note: Under section 137.1 of the Criminal Code Act 1995, it is an offence
 to knowingly provide information to a Commonwealth entity that is false or
 misleading in a material particular, or to omit any information without which the
 information is misleading in a material particular.
- Penalty: 12 months imprisonment

I declare I am:						
the spo	onsor					
OR						
authori						
By signing this, I declare that the information I have provided above is true and correct.						
Name						
Position*		Email:				
Telephone		Facsimile:				
Signature		Date:				

Please note we may request more information before processing the change of sponsor name. The TBS Helpdesk aim to make process the notification within ten working days of receipt.

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^{*}To authorise, the signatory must be an authorised representative listed on the sponsor's TGA account.