



RWANDA FDA
Rwanda Food and Drugs Authority
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QMS N^o: DIS/CKL/080
Revision No: 0
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Ref. Doc: Guidelines
DIS/GDL/005

III. REQUIREMENTS FOR PREMISE REGISTRATION AND LICENSING OF RETAIL OF FOOD PRODUCTS			New application	Renewal	Change ownership	Change location	Additional branch
Premise name:							
Date :/...../.....			YES	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents							
1	Application letter addressed to Director General		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Application form for premises registration and licensing of food premise		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Certificate of RDB / RCA		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	The Identity Card/Passport of the managing Director or representative		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Recent photo passport of the managing Director or representative		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Proof of Payment of prescribed fees to Rwanda FDA Accounts.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Original license		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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