

To: Complementary Health Products Branch
Health Products Regulation Group
Health Sciences Authority
11 Biopolis Way #11-01 Helios Singapore 138667

UNDERTAKING FORM FOR WEBSITE ADDRESS OR QR CODE ON PACKAGING MATERIALS OF HEALTH SUPPLEMENTS AND TRADITIONAL MEDICINES FOR VOLUNTARY NOTIFICATION

Product name (including brand name): _____

I _____ (full name) being a person authorised by my company to submit the notification of the above product hereby undertake to:

- Ensure that the product claims on the website(s)* would not exceed the scope of allowable claims as stated in the Guidelines for Claims and Claims Substantiation of Health Supplements and Traditional Medicines.
- Apply for the relevant permits before carrying out any advertisement or sales promotion of the above product, where applicable. I understand that notification of the above product does not imply that the product name and/or its claims will be allowed for advertising purposes.
- Not use HSA's correspondence on the product notification of Health Supplements and Traditional Medicines as a marketing tool to advertise or promote the above product.
- Not suggest that the use of the product is promoted or endorsed by HSA.

*Website refers to website address stated on or linked from QR code on packaging material(s) (such as inner label, product leaflet and outer box).

Signature: _____

Designation: _____

Name of company: _____

Email: _____

Date: _____