様式第八十八（第百六十三条関係）

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| 管理医療機器 | 販売業 | 届書 |
| 貸与業 |

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| 営業所の名称 | |  | | | |
| 営業所の所在地 | | 〒　　－ | | | |
| (法人にあっては)薬事に関する業務に責任を有する役員の氏名 | |  | | | |
| 管理者 | 氏　　　名 |  | | 資格 |  |
| 住　　　所 |  | | | |
| 営業所の構造設備の概要 | | 裏面のとおり | | | |
| 兼営事業の種類 | |  | | | |
| 備考 | | (販売・貸与する品目)　　　※販売期間が決まっていれば期間を記載 | | | |
| 担当者： | (電話番号)　　　　－　　　　－ | | |

上記により、管理医療機器の販売業の届出をします。

年　　月　　日

法人にあっては、主

たる事務所の所在地

住　所

法人にあっては、名

称及び代表者の氏名

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大分県知事　　　　　　　　　殿

（注意）

１　用紙の大きさは、Ａ４とすること。

２　字は、墨、インク等を用い、楷書ではつきりと書くこと。

３　管理者の氏名、資格及び住所の欄は、特定管理医療機器を販売等する営業所の場合のみ記載すること。管理者の資格欄に記載する場合には、特定管理医療機器営業管理者等が第175条第1項各号のいずれに該当するかを記載すること。

４　営業所の構造設備の概要欄にその記載事項のすべてを記載することができないときは、同欄に「別紙のとおり」と記載し、別紙を添付すること。

５　兼営事業の種類欄には、当該営業所において医療機器の販売業又は貸与業以外の業務を併せて行うときはその業務の種類を記載し、ないときは「なし」と記載すること。

６　備考欄に、販売等を行う品目を記載すること。

７　販売・貸与を行う期間が決まっている場合は、備考欄にその期間を記載すること。

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| 営業所の構造設備の概要及び平面図 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 構　 　造　 　設　 　備 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 採　　　　　　　　　　光 | | | | | | | | | |  | | | | | | | | | | |  | 常時居住する場所 | | | | | | | |  | | | | | | | | |
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| 換　　　　　　　　　　気 | | | | | | | | | |  | | | | | | | | | | |  | 不潔な場所からの 区別 | | | | | | | |  | | | | | | | | |
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| 清　　　　　　　　　　潔 | | | | | | | | | |  | | | | | | | | | | |  | 取扱品目の 貯蔵設備 | | | | | | | |  | | | | | | | | |
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|  | 営業所の平面図（営業所内の設備、器具等の配置図を記載すること） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | （記載上の注意） | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | 構造設備の記載欄は各項目ごとに支障ないと認められる場合はそれぞれ「良好」と記載すること。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | (注) | | (1) | | 常時居住する場所及び不潔な場所からの区別については取り外しのできるカーテン、ツイタテ等 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  | は不適であること。 | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | (2) | | 平面図は医療機器の保管、陳列、設備が明確に識別し得るようその配置状況を記載すること。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| ※ 変更事項 |  |  | | ※ この欄は届出者において記載の必要はありません。 | | | | | | | | | | | | | | | | | | | |  | | |
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