# ****Template Letter of Product Confirmation****

[Manufacturer's letterhead]

[Date]

Director

Drug Programs Policy and Strategy Branch

Health Programs and Delivery Division

Ministry of Health

3rd Floor, 5700 Yonge Street

Toronto, ON M2M 4K5

Dear Director:

## RE: [Product name/generic name, strength, and dosage form (the “Product”) manufactured by <name of manufacturer> (“the Manufacturer”)].

This is to confirm that, except for embossing/marking and labelling, <NOC product name/generic name/strength/dosage form> is identical to the cross-reference product, <product name, manufacturer name> with respect to physical and chemical properties, including strength and dosage form; formulation including both active and inactive ingredients and their quantities; raw materials and finished product specifications; manufacturing process; manufacturing sites; package format and size.

Name:

Title:

I have authority to bind the Manufacturer

Note: There must be two letters of product confirmation submitted (one from NOC holder and one from the Other Party). In instances where the marking of the submitted product is the same as cross-referenced product, the manufacturer must confirm the embossing/marking is the same.