(Ver.3.0)

## Inquiry Form for Consultation

## <u>To: Food Additive Designation Consultation Center (FADCC)</u> <u>National Institute of Health Sciences, Japan</u>

E-mail:fadcc@nihs.go.jp

1. Please fill in the following items.

Inquiry date (yy/mm/dd)		
Company(/Association) name		
Address		
Person in charge	Department	
Phone number		
E-mail		

2. Please fill in the following items for consultation detail. Click on  $\Box$ , and it will be  $\square$ .

Classification	$\Box$ Designation $\Box$ Revision of standards for use			
(Select all applicable items)	□Revision of specification(s) □Others ( )			
Consultation issue (Select all applicable items)	<ul> <li>□ Overview on the food additive (Name and use, use status in other countries, etc.)</li> <li>□ Effectiveness</li> <li>□ Safety</li> <li>□ Specifications</li> <li>□ Standards for use</li> <li>□ Preparing documents for application</li> <li>□ Others ( )</li> </ul>			
Name of the food additive	(In case of Designation, Name of the substance and its English name that you wish to use as the name of the food additive such as substance name)			
Component composition	<ul> <li>Please provide as much information as possible regarding the item you wish to request for designation as a food additive (hereinafter referred to as "your item").</li> <li>e.g., main component ○○○: △%, impurity: ◇◇◇ etc.</li> </ul>			
Subject foods of your item	e.g., breads			
Effectiveness and intended use for foods	e.g., improvement of the preserving property of foods			
Brief explanation of usage				

			(Ver.3.	
	og Add this produ	et to wind ote mix ar	nd romovo by filtration	
Classification related to the	e.g., Add this product to wine, etc., mix, and remove by filtration. Please check the box if any of the followings apply to your item.			
FSCJ's <sup>*1</sup> Guideline for Risk Assessment of the Food	□Flavoring substat			
Additives	$\Box$ None of the above	7e		
consumer with your item in	cription of the probl n 200-300 words. Ple	em to be solved by an ase also explain why y	nd the benefits to Japanese ou think your item needs to be or the specification to be	
Details of consultation				
Please also submit materia of the components, usage in		tc.) with this application	e food additive (e.g., outline on. Safety Commission of Japan	
Pre-checklist of this inquiry ease also check the following c designation/amendment" s		to the items listed in t	he "Summary of your proposal	
armaceuticals and Medical ave you verified with the off	Devices (PMD Act)" icer in the public he aceuticals, quasi-dru	alth center whether yo gs or etc. as defined in	nd Safety of Products Including our item and its use do not fall n the PMD Act? If so, you are	
□Yes, I did (PMD Act not ap		□No		
□Other (reason:	<b>I</b>		)	
ood Sanitation Act (FSA)? * The term "additives" as	ealth center that you used in this Act mea by other methods in	ns substances which a	an additive * as defined in the re used by being added, mixed cing food or for the purpose of	
⊐Yes, I did (FSA applicable)		□No		
□ Other (reason:				
e.g. Because	of revision of standards	for use of a food additive v	vhich have already been specified )	

3-3 Verification regarding imported food or food additives

If it is a case related to the importation of your item or food products using your item, have you verified with the food monitoring section of the quarantine whether the importation is allowed or not?

 $\Box$ Yes, I did (compliant with the FSA)  $\Box$ Yes, I did (not compliant with the FSA)  $\Box$ No )  $\Box$  Other (reason:

Does your item fall under the category of the one produced using Genetically Modified Organisms?

□Yes □No □Not sure

## Note

The consultation is provided in Japanese at the FADCC. You bring interpreter(s) with you at the consultation if you need.