**Request for transfer of the framework agreement – TEMPLATE (EXAMPLE)**

**Reason for the transfer:**

[Insert reason for the desired transfer]

**Insert information about each agreement included in the transfer:**

* **Year:** [Insert year]
* **Tender group:** [Insert tender group]
* **Tender number:** [Insert tender number]
* **Item number:** [Insert item number]
* **Active substance:** [Insert active substance]
* **Dosage form:** [Insert dosage form]
* **Strength:** [Insert strength]
* **Package size:** [Insert package size]

**Contact information for the new supplier:**

* **Full company name:** [Insert full company name]
* **Address:** [Insert address]
* **CVR number (for Danish companies)****:** [Insert CVR number]
* **VAT Number/Company Registration Number (for foreign companies):** [Insert VAT Number/Company Registration Number]
* **Contact person for the transfer:** [Insert contact person]

**Changes resulting from the transfer:**

[Insert information about any changes to item number, distributor or similar]

The suppliers confirm with their signatures that the item is listed on www.medicinpriser.dk from the date the desired transfer takes effect.

**Desired date for the transfer to take effect:** [Insert date]

The desired transfer is approved by both suppliers with their signatures.

**Signatures:**

**Transferring supplier:**  
[Insert signature]

**New supplier:**  
[Insert signature]

*Once Amgros has received the completed and signed form, Amgros will decide whether the framework agreement(s) can be transferred as desired and on the desired date stated by the suppliers above.*

*Amgros will strive to provide notification of this as soon as possible after receiving both the completed form and all necessary documentation, as described in “Supplier Guide – Transfer of a framework agreement with Amgros to another supplier”.*