File no. DCG(I)/Misc./2025-4 Government of India Ministry of Health & Family Welfare Directorate GeneralofHealthServices Central Drugs Standard Control Organisation FDA Bhawan, Kotla Road, New Delhi-110002

Public Notice

0 4 MAR 2025

Sub: Launching of registration of Clinical Research Organisation (CRO) applications through SUGAM portal- Reg.

The Ministry of Health and Family Welfare has published G.S.R. 581(E) dated 19th September 2024, wherein registration of Clinical Research Organisation (CRO) has been made mandatory with effective from 1st day of April, 2025.

In this regard, the online registration of Clinical Research Organisation (CRO) is now functional on SUGAM portal (www.cdscoonline.gov.in). Applications for registration shall be submitted through SUGAM portal only along with the prescribed checklist of documents for the registration.

Im

(Dr. Rajeev Singh Raghuvanshi) Drugs Controller General (India)

Enclosure: User Manual

Copy to

1.All the Stakeholders Through CDSCO Website 2.CDAC Team





User Manual

for

SUGAM- An e-Governance solution

Online Forms Submission CRO(Clinical Research Organisation)

by

Central Drugs Standard Control Organisation (CDSCO)



Directorate General of Health Services Ministry of Health & Family Welfare, Government of India

Centre for Development of Advanced Computing

(A Scientific Society of the Ministry of Electronics and Information Technology, Govt. of India)

Anusandhan Bhawan, C-56/1, Institutional Area Block-B, Sector-62, Noida-201309 Phone:91-120-2210800 Website: www.cdac.in

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Application for Registration of Clinical Research Organisation

Application for the Form CT07B is now available on SUGAM Portal. Applicants may follow below steps to register themselves as CRO.

Registration process for new users

New users can visit the SUGAM Portal and click on Login/Sign-Up. Navigate to sign-up here and select the registration purpose as "Clinical Research Organisation".

Applicants may the fill the registration form as per below screenshot. Please note that the email address mentioned in the username will be used in future for further communication and for the verification of email address upon successful form submission.

Once the email address is verified, competent authority at CDSCO will further review the account request and grant approval accordingly. Once the account is approved by CDSCO, applicants may login into the SUGAM portal.

It is important to complete user profile to enable form submission. Below listed details are required to complete the user profile.

- Add Member Details
- Add Contact Person Details

Applicant Details	
Applicant Type:*	* Applicant for CRO(Clinical Research Organization) Multiple Roles can be selected
User-Name:*	Enter Corporate Email Id
Password:*	Enter Password Only Best Passwords are accepted
Confirm Password:*	Confirm Password Only Best Passwords are accepted
Name:*	Mr. First Name Middle Name Last Name Instrume Mail Antiparticle Name Last Name Middle Name Last Name Middle Name Last Name Middle Name Middle Name Last Name Middle Name Middle Name Middle Name Last Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Middle Name Mid
Mobile Number:*	+91 Mobile Number
Gender:*	\odot Male \bigcirc Female
Nationality:*	Indian 🗸
ID Proof Details:* (Single PDF < 10 MB)	Select One Choose File No file chosen ID Proof No. Description of the Analysis of the Anal
	m dendry proof is other than Addia Card, then Applicants are required to upload their Addiar details in SOGAM Portal within 2 months of obtaining Login Credentials.
Undertaking:* (Single PDF < 10 MB)	Choose File No file chosen
Designation:*	Name of Designation
Alternate Email ID:	Alternate Email ID

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Registration process for existing users

Existing users on SUGAM Portal may submit a request for additional role from user profile. Applicants may select role as "Clinical Research Organisation".

It is important to complete user profile to enable form submission.

	User Profile	
		Request for Additional Role
-General Deta User-Name:	ls Registered Email Address	
Organisation:	Testing Testing Enclave, Tester Group, Mumbai City Mumbai -123123, Maharashtra, India Phone : 0-1212121212, Fax :0-3434343434,	
Address Proof	Type of Organization: No Data	

FORM CT-07B

Applicants may login into the SUGAM Portal and click on submit application page. Select "GCT Division" as department and "Form CT07B" as the form. Click on the checkbox for the undertaking and click on "Proceed" button to proceed further.

Select Department: 🧿	GCT Division	~
Select Form:	Form CT-07B	~
☑ I agree that I will provide accurate information and I will be solely	responsible for any false or inaccu Proceed	rate information provided to the division.
After clicking on "Proceed" button form for CRO reg	istration or renewal will	open. Below mentioned
Purpose of Application		

Application in Form CT-07B can be filled either with the registration purpose or renewal purpose.

Correspondence Address

Kindly select correspondence address from the dropdown menu. In case the address details are not available then the same can be added from "Add Address Details" page from "User Profile" available in top left menu.



• Details of Accreditation

Select option as "Yes" in case details of accreditation are available. Upon selecting "Yes" additional field will be visible where details of accreditation can be added. In case details of accreditation are not available, kindly select "No".

APPLICA	Fc [See Ru TION FOR REGISTRATION/RE	DTM CT-07B le 38B(1) and 38D(2)] ENEWAL OF CLINICAL RESEARCH ORGANIZATION
Applicant details		
Name: Mr. Applicant Designation: Tester Address & Contact Details: Testing Testing Enclave, Tester Group, Mumbai, M <u>Email:</u> <u>Phone No:</u> 1212121212 <u>Fax No:</u> 3434343434	laharashtra-123123, India	
Application details		
Purpose * Select Correspondence Address * Detail Of Accreditation,if any : *	For Registration Certificate TESTING IN CHINA, FOR TESTIN Yes O No	✓ IG PURPOSE, Wuhan -6589 (Indonesia) ✓ Accreditation Details
	🖺 Save 🔀	Reset

Click on the "Save" button to view the preview of the application form. Kindly ensure that the details mentioned in the preview page are in line with the details entered on the application page.

Click on "Proceed to Checklist" button in order to view the checklist. Submit necessary documents on all checklist items and proceed further with the payment for the application.



On the payment page select "Online" as the mode of payment and the purpose.

- Fees for registration application is Rs. 500000
- Fees for renewal application is Rs. 100000

Kindly ensure that the payment purpose is selected either as "CRO Registration" or "CRO Renewal" on payment page before generating deposit slip for *bharatkosh*.

Select desired challan from the dropdown menu "Payment Reference Number" and click on "Submit"

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button to proceed further.

Payment Details					
ayment has been calculat	ed as below:				
Payable Amount in₹	500000	Head of Account	0210-Medical and Public Health, 04- Public Health, 104-Fees and Fines		
Mode of Payment *	Online		✓ Purpose *	CRO Registration (Form CT-07B)	v
Payment Reference No.*	Select		Payment Status		
Total Amount of Uploa	ded Challans 0				
			↑ Submit		

Final preview of the application will be displayed, kindly ensure that all details are correct, and payment related details are also captured correctly on preview page. Download system generated legal form by clicking on "Download PDF" button. System generated form needs to be duly signed by the applicant.

APPLICATION FOR REGISTRATION/RENEWAL OF CLINICAL RESEARCH ORGANIZATION		
I/We Mr. Applican Research Organiza	t (Tester) of M/s. Testing, Testing Enclave, Tester Gr ation. The details of the application are as under.	up, Mumbai, Maharashtra -123123 hereby apply for grant of registration of my/our Clinical
1. Name of applica	nt:	Testing
2. Nature and cons	titution of applicant :	No Data
3.(i) Applicant add	ress :	Testing Enclave, Tester Group, Mumbai, Maharashtra - 123123 CONTACT: 1212121212 FAX: 3434343434 <i>Registered Email Address</i>
(ii) Address for cor	respondence :	TESTING IN CHINA,FOR TESTING PURPOSE, Wuhan -6589 Not Available,Indonesia
4. Details of accred	litation, if any :	YES (Accreditation Details)
5. Fee paid on 18-F 6. I have enclosed	eb-2025, Rs.500000 Receipt or challan or transaction the documents as specified in the Table 1 of Ninth S	ID qwdwqd
7. I hereby state ar (i) I shall comply v like Good Clinical Clinical Trials Rul (ii) I shall comply and the Rules mad (iii) I shall allow th the premises and t	d undertake that: with the conditions imposed on the registration cert Practices guidelines and provisions of the Drugs es, 2019. with such further requirements, if any, as may be se there under. the Central Licensing Authority and/or any person at o examine the process/procedure and documents in	ficate along with the adherence to other guidelines and Cosmetics Act, 1940, and the New Drugs and pecified by the Government of India, under the Act thorized by him in that behalf to enter and inspect respect of any clinical trial conducted by us.
PLACE		Signature
DATE	25-Feb-2025	Name
		Designation

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Click on "Next" button to proceed further with form submission.

Kindly upload duly signed copy of legal form on the final submission page and click on "Submit To CDSCO" button. Please note application number for future reference. Acknowledgement email for file submission will be sent on registered email address.

Application will be visible under "Submitted Applications" on applicant dashboard. Applicant may utilize *e-vartalap* functionality to communicate with concerned division during the course of file processing.

In case of any query applicant may raise ticket for IT-Helpdesk using "Raise Ticket for Help-Desk" option in top left menu.

Your Application has been submitted successfully. Kindly note your file no. *CRO/NEW/CT07B/2025/10* for future correspondence.