

[Your Name]
[Your Position]
[Your Company/Organization]
[Company Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Recipient Title]

MHRA

[MHRA Address]
[City, State, Zip Code]

Dear [Recipient Name],

Subject: Submission of [Type of Submission] for [Product/Trial Name]

We are writing to submit [brief description of the submission, e.g., an Investigational Medicinal Product Dossier (IMPD), Clinical Trial Application (CTA), etc.] for [Product/Trial Name].

1. ****Introduction****

- Provide a brief introduction to the product/trial, including relevant background information.

2. ****Details of the Submission****

- Outline the specific details of the submission, including protocol number, product name, and any important deadlines.

3. ****Supporting Documents****

- List all supporting documents being submitted, including but not limited to:

- [Document 1]
- [Document 2]
- [Document 3]

4. ****Regulatory Compliance****

- Confirm that the submission complies with all relevant regulations and guidelines mandated by the MHRA.

Thank you for your attention to this submission. We look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Typed Name]
[Your Position]
[Your Company/Organization]