

Halal Care Foundation India

Address: # MIGH 57, Santoh Nagar, Post: Saidabad,
Hyderabad-500 059 (T.S.), INDIA
Mobile: 91 9399953203
Email: application@halalcarefoundation.in
URL: http://www.halalcarefoundation.in



Applications Form for Halal Certification

Details of Entity/Company

Name of company/firm/proprietorship concern/other:

Nature of company:
(Pvt. Ltd./Public Ltd./Firm/Proprietorship/other)

Registered address:

Address Line 2 :

City: Zip Code: State: Country:

Name of authorized person:

Designation: Phone No(s):

Website URL: Email:

Manufacturer: Yes / No

[If you are under this category than select (Yes) otherwise select (No)]

Type of product:
(Foodsstuff/Food supplement/Pharmaceutical/Cosmetic/Ayurvedic/Homeopathy/other)

Plant name:

Plant address:

Name of contact person: Designation:

Tel. No(s): E-mail address:

Nature of manufacturing:
(Self manufacturing /Third party manufacturing/Contract manufacturing)

Briefly describe logistics of the product:

Signature of authorized person

.....
.....
Briefly describe pest control of the Product in premises:

Submit the list of your product, descriptions of ingredients and process flow chart in specimen given in **Annexure –I**, **Annexure –II** and **Annexure –III** respectively.

Abattoirs: Yes / No

[If you are under this category than select (Yes) otherwise select (No)]

Description of animal to be slaughter:
(Bovine/Goat/Sheep/Chicken/other)

Slaughter house name:

Slaughter House address:

Number of Halal Butchers:

Number of cattle / birds slaughtered per day:

Briefly describe pest control in area or premises:

Whether for Domestic consumption / export:

If export : Country of destination:

Specific requirement by Importer (if any):

Contact person: Designation:

Tel. No(s): E-mail address:

Submit the description of Slaughter house and process flow chart in specimen of **Annexure – IV** and **Annexure – V** respectively.

Food chain: Yes / No

[If you are under this category than select (Yes) otherwise select (No)]

This category covers restaurant, hotel, canteen, caterer, sweet shop/food outlet /et

Description of food supplied:
(Arabian/ Chinese/ Indian/ other)

Name of Restaurant/ hotel/ caterer/other :

Detail address:

Signature of authorised person

List of the dishes prepared/ Menu:.....
(Please attach separate sheet)

Zubiah (Slaughtering) of animal / bird carried:.....
(In-house / Out-House)

Pest control details:.....

Details of cooking oil and fat used:.....
(Specify the fat and oil used & description of animal fat / Veg. fat/ oil with brand names)

Detail of spices used:.....
(Please attach separate sheet)

Number of employees:.....

Details of license/ registration / permission from local government to run the food chain / hotel/ outlet/ otherwise: (required as per local laws / government bodeis)

License No. /Registration No/ other:.....

Date of Issue:..... Date of expiry:.....

Name of issuing authority of license:.....

Nature of water used:.....
(Tap water/ bore well/ mineral / other)

Name of contact person:.....

Designation:..... Tel. No.

Email address:.....

Note: This category require extreme care as there are very much possibilities to that the spices/ fats/ MSG / colures / food stuff/ cooking materials/ synthetic fragrance/etc., may be made or contaminated with haram (forbidden) material or things. The HCFI strictly examine each and every food and their recipes with ingredients used in cooking and cooking martial. Particularly in respect of Zubiah meat, it is more advisable to appoint Muslim butcher for Halal zubiah or supervise the slaughtering by own if it is purchase from out-house source. The food operator should keep themselves away from Najas or contamination with haram food and follow the hygiene and cleanliness in accordance to the safety of health.

Service provider: Yes / No

[If you are under this category than select (Yes) otherwise select (No)]

This category covers logistic, supply chain, warehouses, cold storage, packaging, transporters, etc.

Name of your organization/business name/ etc.:.....

Nature of business handling:.....
(Function of business)

Address of premises where the food product handled or transported:
.....
.....

Signature of authorised person

Description of packaging:

Description of transportation:

Description of other products handled in the premises or transportation:

Describe a brief History of Supply Chain of Ingredients/Raw Materials:

Briefly describe logistics of the Product:

I/we declare that the information and details submitted above are true and based on real facts & practices followed. All that ingredients/raw Materials /derivatives/ process are mentioned true in the above application/annexure. We undertake that we will not change any ingredients/ raw metrical/ process/ etc., without written permission and approval by HCFI.

Signature:

Name of signatory

Designation

Company Seal & Stamp

Date:

***Note:** The HCFI, undertakes that it will guarantee all information supplied by or obtained from the application in respect to its processes, business secrets, prices and operations are in the strictest confidence and it will not leak such information for the benefit of any other person or third party company.*

Note: Kindly follow the following instructions:

- 1.A covering letter should be submitted with application form on company letterhead.
- 2.Brief Company Profile.
- 3.Xerox copy of registration of company or firm or entity.
- 4.Xerox copy of license of food operation under /fassai/drugs and cosmetic act/ veterinary department / Municipal or local government body /as per applicability.
- 5.Submit the affidavit and agreement of post halal-certificate inspection in specimen annexure VI & VII.
- 6.Submit the annexure I, II, III, IV & V as applicable to the applicant.

For Office Use only:

Date of Receiving: _____ Date of Approval for Certification: _____

File No. _____ Signature: _____

Annexure - I
[Product(s) details]
List of the product to be halal certified
For manufacturers and processors

Select the type of product:
(Foodstuff/Food supplement/Pharmaceutical/Cosmetic/Ayurvedic/Homeopathy/other)

Sl. No.	Brand Name	Product Name	Description of Product and usage
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			

Signature:

Name of signatory authority

Designation:

Company Seal & Stamp:

Date:

Annexure - II

INGREDIENTS & RAW MATERIAL OF THE PRODUCT

For manufacturers and processors

(Should be submitted separately for each product)

Brand Name:

Product Name:

Sr. No.	Ingredient Name including colour code	E- Code (If any)	Manufactured by	Address of Ingredient Manufacturers Phone No. Website URL	Whether Halal Certified ingredients are used (details)?
1					
2					
3					
4					
5					
6					
7					

Signature:

Name of signatory authority

Designation:

Company Seal & Stamp:

Date:

Note: 1. Separate format for each product should be submitted.

2. All ingredients, catalyst, colour, fragrances, intermediate, etc., minor or traces should be described in the above form.

Annexure - III

**Brief description of manufacturing process
of product from starting to end user**
(For manufacturers and processors)

(Process Flow Chart)

Signature:

Name of signatory authority

Designation:

Company Seal & Stamp:

Date:

Annexure - IV
(For Abattoirs)

Name of animal: Bovine/ Mutton / Chicken/other	
Slaughter House: Name	
Slaughter house Address	
Name of contact person	
Number of veterinary doctor to check the health of animal	
Number of Shariah Supervisor	
Number of Halal Butchers	
Number of cattle / birds slaughtered	
Whether for Domestic consumption / export	
If export : Country of destination	
Specific requirement by Importer (if any)	
Name of pest control company (if any)	
Name of existing Halal certification body (if any)	

Signature:

Name of signatory authority

Designation:

Company Seal & Stamp:

Date:

Annexure - V

**Brief description of slaughtering of animal
From slaughtering to packaging/transporting
(For Abattoirs)**

(Process Flow Chart)

Signature:

Name of signatory authority

Designation:

Company Seal & Stamp:

Date:

Annexure - VI

AFFIDAVIT
(To be typed on a Rs. 100 Stamp Paper)

We M/s. (_____) situated at (office address) AND having our factory/plant/food handling premises/non food handling premises at (factory/plant address/premises address), on solemn affirmation state on oath as follows:

1. That we declare that we followed the halal compliance in our factory / product/ Pharma industry / cosmetic industry/ hotel/ logistic/ (put the proper name) for our product or services.
2. That we further declare that we are the manufacturers of Product(s)/ food operator of following item:

(_____);
3. That in the above mentioned product/s or services it does not contain any ingredient/substance/etc, which is Haram, forbidden under Islamic Shariah.
4. That there is no un-Islamic or unlawful process used in the manufacturing or processing of the above product/ or services.
5. That if anything is found against Halal as per Islamic Sharia in future or at any occasion then we shall be responsible personally.
6. That all the contents and information provided in application form is true to the best of my knowledge and belief.

Solemnly affirmed at on this ____ day of _____ 20

Signature:

Name of signatory authority

Designation:

Company Seal & Stamp:

Date:

Annexure - VII

(To be typed on a Rs. 100 Stamp Paper)

Agreement of Post- halal certificate inspection

This Agreement of Post-halal certificate inspection is made and executed on this ___ day of ___ 2016 at Hyderabad by and between:

Name of applicant / company /firm /proprietor / etc.

(Hereinafter called the “**Party No. 1**” which term shall mean and include legal representatives, heirs, administrators, executors, successors and assignees etc. of the ONE PART)

In favour of

Halal Care Foundation India, # MIGH 57, Sanotshnagar, Post: Saidabad, Hyderabad (T.S.) represented by it's managing trustee Moulvi M. A. Hafez S/o M. A. Ghani.

(Hereinafter called the “**Party No. 2**” which term shall mean and include legal representatives, heirs, administrators, executors, successors and assignees etc. of the OTHER PART)

Whereas the Party No. 1 is engaged in the business of food operating/ pharama/ cosmetics/ other specify and manufacturing/ processing halal products.

Whereas the Party No. 2 is a Halal certifying trust and Party no. 1 approached at party No. 2 to get halal certificate for their product or services.

Whereas it is expedient to look and keep observation on the activities of the food operators i.e. halal certified companies after getting halal certification for their product or services from Party no. 2 and it is necessary to maintain halal compliance strictly therefore the party No. 1 agreed on the terms below:

NOW THIS AGREEMENT OF POST-HALAL CERTIFICATE WITNESSETH AS HEREUNDER:

1. That party No. 1 shall maintain halal compliance as per details supplied by him in application form and in terms of instruction given by the party No. 2 till the completion of period of one year from the date of halal certificate.
2. That the party No. 1 shall follow the rules and regulation of party No. 2 in compliance of halal certification.
3. The party No. 2 shall have right to visit Party No. 2 (applicant concern) premises in working hours without intimating to party No. 1 and conduct unexpected inspection of premises or company /hotel/working place/etc., of Party No. 1 in accordance to the details provided by party No. 1 in his/their application for halal certificate, during such inspection the Party No. 2 shall collect samples of finished products/ ingredients /raw material / foods/etc., and invoice of raw material or ingredients / as the case may be, on which party No. 1 shall not have objection for the same.
4. That after inspection if party No. 2 found anything against halal compliance or find objectionable things such as haram(forbidden) substance / ingredients / material/ etc., in samples collected during sudden expected inspection then the party No. 2 shall have right to cancel the halal certificate issued to party No. 1 and such cancellation shall be put on the website of Party No. 2 to inform the general public.

IN WITNESSES WHEREOF the above named PARTIES have put their respective hands in this ‘Agreement of Post-halal certificate inspection’ signed off with their free WILL and consent without an force/coercion on the day, month and year first mentioned above in presence of the following witness at Hyderabad (T.S.)

WITNESSES:

1.

Party No. 1

()

2.

Party No. 2

()