



**HALAL INDIA PRIVATE LIMITED
CERTIFICATION DIVISION**

APPLICATION FORM FOR PRODUCT CERTIFICATION

1. Details of the Applicant			
Applicant Name			
Regd. Address *			
Address Line 2			
Phone No *			
Website*			
Name of the Chief/ CEO/ Director/ MD/ VP/ President of Applicant*	Landline No:		
	Mobile No:		
	Email ID:		
	Fax No:		
	Skype ID:		
Website:			
No of Employees*			
Type of Industry	Choose an item.		
Annual Turnover*			

2. Details of Manufacturer of Product(s) for Certification			
Unit Name			
Unit Address*			
Address Line 2			
Brand Name			
Primary Point of Contact Person*	Landline No:		
	Mobile No:		
	Email ID:		
Secondary Point of Contact Person*	Landline No:		
	Mobile No:		
	Email ID:		
Total No. of Production Line/ Units			

3. Product & Process Details:	
Specify Scope of Certification (Please mention here the Process information, e.g.: Slaughtering OR Production & Packaging OR only Processing, etc)	
Is the Processing/Manufacturing unit certified with:	<p>a. <input type="checkbox"/> HACCP</p> <p>b. <input type="checkbox"/> ISO 22000</p> <p>c. <input type="checkbox"/> FSSC 22000</p> <p>d. <input type="checkbox"/> ISO 9001</p> <p>e. <input type="checkbox"/> BRC</p>



**HALAL INDIA PRIVATE LIMITED
CERTIFICATION DIVISION**

APPLICATION FORM FOR PRODUCT CERTIFICATION

	<p>f. <input type="checkbox"/> GMP</p> <p>g. <input type="checkbox"/> Any Other Certification (Please specify) :</p>
Halal Certification required for export purposes only?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If export, Please Specify Export Region.	<input type="checkbox"/> Asian Countries <input type="checkbox"/> African Countries <input type="checkbox"/> European Countries <input type="checkbox"/> North American Countries <input type="checkbox"/> South American Countries <input type="checkbox"/> Australia/ Oceanic Countries
Mention Export Territories	<input type="checkbox"/> JAKIM - MS (Malaysian Halal Standard) <input type="checkbox"/> MUIS (Singapore Halal Standard) <input type="checkbox"/> UAE / GSO (GSO Standard -GCC) <input type="checkbox"/> SFDA (KSA Halal Standard) <input type="checkbox"/> SMIIC (Turkey Halal Standard) <input type="checkbox"/> MUI/ BPJPH (Indonesian Halal Standard)

4.Type of certification request:	
Initial Certification <input type="checkbox"/>	Recertification/ Renewal <input type="checkbox"/>
<p><i>Please note that details of the trade-wise number of employees will assist HI in estimating the audit duration. Hence, please provide accurate details to avoid any potential concerns during the audit. The details shall be reviewed during the audit and onsite audit man-days will be revised accordingly. If any deviations are found. You may change the employee's description as applicable to your industry.</i></p> <p><i>Use additional sheets if required to provide the below-requested information.</i></p>	
No of Employees	
No of HACCP Line/ Production Line / Processing line:	
Mention the details:	

5.Supporting Documents Required for Halal Application	
GST Details, if yes please mention	
PAN Details, if yes please mention	
TAN Details, if yes please mention	
MSME Details	
Valid Industry/Trade License	<input type="checkbox"/> Yes <input type="checkbox"/> No
Factory License	<input type="checkbox"/> Yes <input type="checkbox"/> No
Non-Disclosure Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No



**HALAL INDIA PRIVATE LIMITED
CERTIFICATION DIVISION**

APPLICATION FORM FOR PRODUCT CERTIFICATION

RM Ingredient List with supplier details	<input type="checkbox"/> Yes	<input type="checkbox"/> No
FG Product List	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Product Specification	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Process flow	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Test Report from NABL accredited Laboratory	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Declaration of Conformity by the Applicant on the Product(s) for Registration using the Applicant's Official Letterhead	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Note: Other requirements may be required by HIPL if deemed necessary to ascertain compliance to the applicable standards prior to product registration.		

Halal Assurance System (HAS) Assessment: Does HAS Assessment cover any of the following and controls defined?
HAS Assessment has been made? <input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please submit:
Whether you want to use Halal India Standard Mark on annexure-1 product list? <input type="checkbox"/> Yes <input type="checkbox"/> No

Declaration: I/we undertake that the information provided by us truly in the application for Halal Certification is based on real practices. All the ingredients/Raw Materials are mentioned truly in the application & annexure (being used in the formulation). I/we agree that the application fees charged by Halal India is a non-refundable amount		
*Client authorized Representative Name/Signature & Stamp:	Designation:	Date:

Confidentiality Statement:

Halal India Private Limited, undertakes that it will guarantee all information supplied by or obtained from the application in respect to its processes, business secrets, prices, and operations will be kept in the strictest confidence and it will not be disclosed for the benefit of any other company.

Note 1)

Annexure-I (on the following page) is a List of your Products / Brands to be certified with the details of ingredients (raw materials, additives, and processing aids) used in the product. The Annexure MUST be duly filled completely, for us to process the quotation, based on the details in the Annexure.

An incomplete list of products or incomplete ingredients detail will not be accepted. We cannot quote the Halal Certification fee without complete details.

Note 2)

Doc. No.: HIPL-CD-PR7.2-01-FM-01	Issue No.: 01 Date:01.08.2021	Approved by: MR	Page 3 of 6
-----------------------------------------	------------------------------------------	------------------------	--------------------



**HALAL INDIA PRIVATE LIMITED
CERTIFICATION DIVISION**

APPLICATION FORM FOR PRODUCT CERTIFICATION

Application forms will only be accepted when fully completed and duly signed by the Proprietor/Director or authorized representative with the company Stamp.

Annexure- I

Detail List of Products & Brands to be Halal Certified

(All columns must be filled & MUST be sent with the application to calculate the fees)

Total Products	Total Brands	Category/ S
----------------	--------------	-------------

(Category selection to be done by HI Office only)

No.	Product Name	Brand Name	Product Description	Ingredients to be used (e.g. raw materials, additives and processing aids)
1				
2				
3				
4				
5				
6				
7				
8				



**HALAL INDIA PRIVATE LIMITED
CERTIFICATION DIVISION**

APPLICATION FORM FOR PRODUCT CERTIFICATION

9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				

For Halal India Private Limited use only:

Doc. No.: HIPL-CD-PR7.2-01-FM-01	Issue No.: 01 Date:01.08.202 1	Approved by: MR	Page 5 of 6
-----------------------------------------	-----------------------------------------------------------	------------------------	--------------------



**HALAL INDIA PRIVATE LIMITED
CERTIFICATION DIVISION**

APPLICATION FORM FOR PRODUCT CERTIFICATION

Application No:	Date Received:	Received By
TAD MANAGER		
SIGNATURE		

If there are more than one unit to be Halal certified, kindly fill in a separate Application form.

If you have any questions regarding the Application,

Please call +91 044 4356 7446 / 044 4265 5527 or mail us at enquiry@halalindia.co.in

www.halalindia.co.in