HALAL CERTIFICATION SCHEME

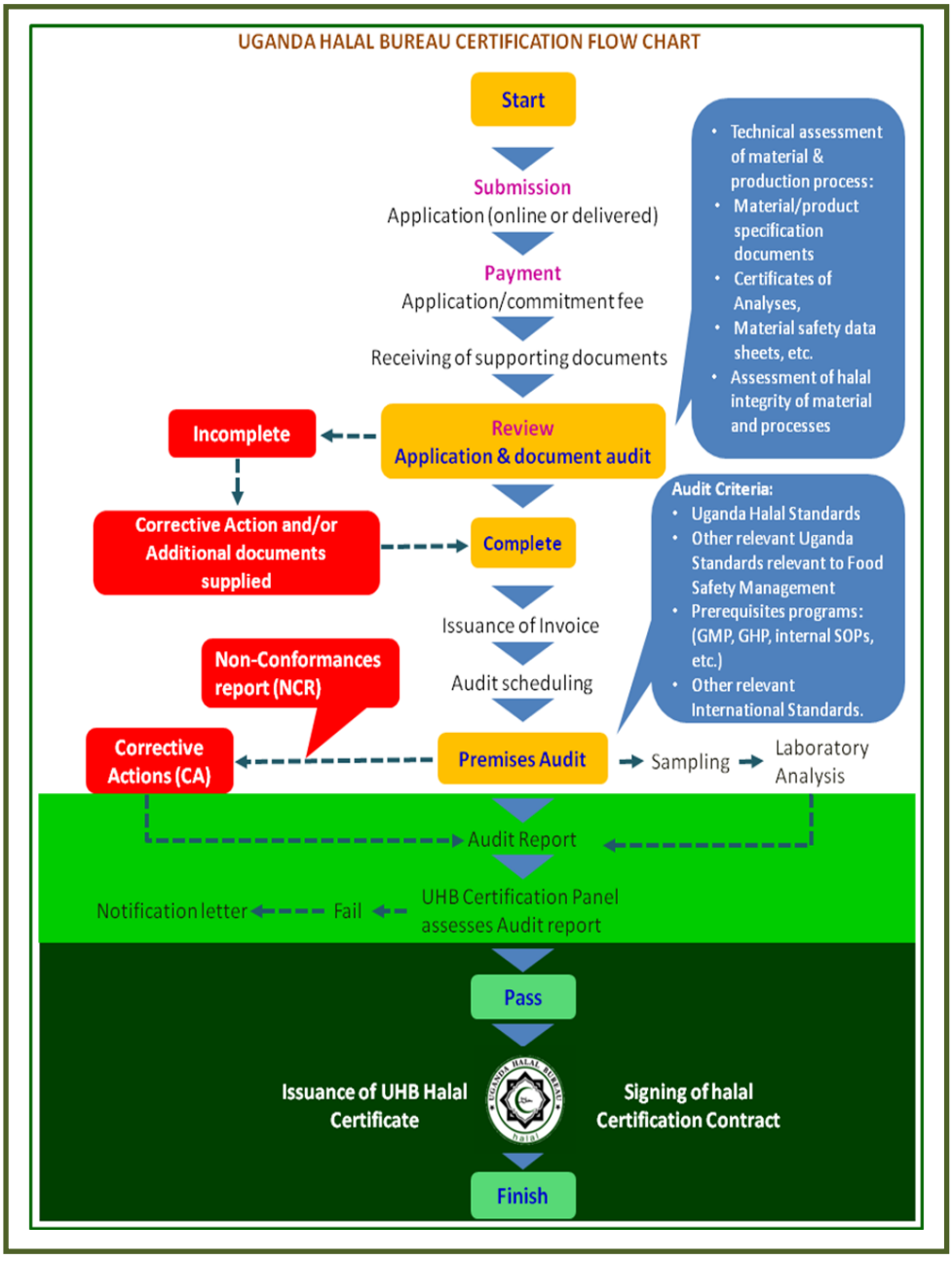
MANUFACTURER'S APPLICATION FORM

Date……

(To be filled in Duplicate)

The information filled hereunder shall be treated as strictly **confidential** and shall not be divulged for the benefit of any other person or company.

	UGANDA **Halal** BUREAU **HALAL CERTIFICATION SCHEME**	
Document Title	INDUSTRY OPERATING FORM	Document No. AF/MOF/ /026
Document Name	**APPLICATION FORM**	Issue No.



1. Name of Establishment/Company/Organisation/Business in full.

……..

2 a) Reason for Certification.

Type of client		**New client**		**Existing client**
Request for		Initial product Halal certification		Removal of product(s) from the present certification scheme
		Extending Halal certification scope		Renewal of Halal certification
				Addition of product(s) from the present certification scheme

2 b) Reason for applying for the Halal certification scheme.

……..

3. Contact information.

Physical location:	Postal Address:
Company Email address:	Company Tel No:
Name and Role of the contact person:	Telephone contact and email:

Nature of the Business/Company (manufacturer, designer, distributor,agent, etc.):	

4. Is the company a legal entity? (*Please attach certificate of registration and trading license*)

…….

5. Name and Description of Product(s)/service(s).

Details of products under the Halal certification scheme.					
No.	**Name of product**	**Nature of product**	**Reference product standards (National/ International)**	**Intended use**	**No. of product brands**
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

9.					
10.					

Details of products to be added to the Halal certification scheme.					
No.	**Name of product**	**Nature of product**	**Reference product standards (National/ International)**	**Intended use**	**No. of product brands**
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Details of products to be removed from the present Halal certification scheme.					
No.	**Name of product**	**Nature of product**	**Reference product standards (National/ International)**	**Intended use**	**No. of product brands**
1.					
2.					
3.					
4.					
5.					
Reason for removal of product from the present Halal certification scheme.					
Suggested plan for onsite audit.					
Any other product certifications your establishment has undergone.					
Inspection of identified portions as part of Halal certification will be carried out by			Client		Uganda Halal Bureau

6. Are there any outsourced processes that may affect conformity?

……

……

7. To which level have you implemented the Food Safety Management System?

……

……

8. Fill in attachments to this form as follows:

- List of raw materials (*attach certificates if available*)
- Details of technical personnel

9. Please provide the following additional information:

- Certificate of registration of business
- Trading license
- Organisational structure
- Copies of labels
- Process flow diagrams
- Most recent copies of external laboratory tests for chemistry and microbiology parameters where applicable
- Medical examination certificates for food handlers
- Halal certificates for raw materials
- Material safety data sheets
- Calibration certificates of all equipment used
- Non-conformance reports.
- Samples of the products to be re/certified
- Pest control certificates
- Employee hygiene checklists

- Sanitation checklists
- Waste management records

10. DETAILS OF TECHNICAL PERSONNEL

No.	Names	Qualification and Training	Designation
1.			
2.			
3.			
4.			
5.			

We, the **authorised representatives of applicant** declare that the information given above is true and shall comply with the requirements for certification and abide by the terms and conditions and any amendments leading to the Halal Certification of our product(s)/service(s). We agree to supply any other information needed for evaluation of the products to be re/certified.

We understand that by virtue of this application, we accept to cater for all costs incurred during the process of certification prior to the on-site audit of our production facility by Uganda Halal Bureau (**UHB).**

We also understand that by virtue of this application We duly authorize **UHB** where necessary and in their sole discretion, to approach other recognized Muslim Authorities or any supplier or manufacturer of any equipment or feeds or other peripherals used by the applicant to verify its conformity with Halal standards set by **UHB.**

For and on behalf of,

……

Name and Signature …….

Designation ……

Name and Signature ……..

Designation ……

Official stamp

DECLARATION OF RAW MATERIALS

Name of Product	**Ingredients and raw materials/ processing aids**	**Origin of ingredient (Plant, Animal or Synthetic)**	**Supplier or Manufacturer's Name and Contact**	**Indicate whether certificates are available (*attach if available*) √ or X**

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For office use only:

Date received: …….

Received by: …….

Remarks: ……

Signature: ……

To Note:

1) *Please return this filled form together with proof of payment, of a non-refundable application fee of Ugx Shs.**50,000/=** to: **Account number; 2000159371**, **Name: Uganda Halal Bureau Limited** in Tropical Bank.*
2) *This Application form is to **only** be reviewed **after** payment of the application fee.*