APPLICATION FOR HALAL SUPERVISION AND CERTIFICATION
(AHSR-001-M)

Date: _____

To: **Department of Halal Inspection and Supervision**
Halal Food Council USA

From: _____
(Authorized Person)

_____
(Name of the Company)

Address: _____

Phone: ( )_____ **Fax:** ( ) _____ **email**: _____

(**Instructions:** *Please submit this application with the required information as outlined below*):
Original HFC Halal Certificate #_____ **Date Issued:** _____
Approved: _____State _____Federal _____EEC _____ AHF
Plant Number: _____
Location of the plant where _____
The animals are slaughtered: _____
Production Capacity: _____
Meat to be Certified: _____Beef ____Lamb ____Goat _____Sheep _____ Other
Slaughter man: _____
Plant Supervisor / Manager: _____
Geographic areas where
The meat is/will be marketed: _____

Name: _____**Signature:**_____

HFC Comments: _____

Note: *The information submitted will be dealt in strict confidentiality and will not be used for other than evaluating this product for certification.*

MMH (Rev.09/09)