



Application Date

Details of the Concern

Name *

Regd. Address *

Address Line 2

City *

Zip Code *

State *

Country *

Web Url

Phone No *

Details Regarding Manufacturing Unit

Unit Name *

Unit Address *

Address Line 2

City *

Zip Code *

State *

Country *

Category

Self Manufacture

Contract Manufacture

Trader / Exporter

Others (Specify)

Type of Industry

Food

Non Food

Pharmaceutical

Cosmeceutical

Nutraceutical

Others (Specify)

Standards &
Certifications of
the Unit

Contact Person

Name	Designation
Mobile No.	Landline No.
Mail Id	

Product Details

No. of Products to be Halal Certified

Total No . of Products produced in the Unit

Exporting Region No Yes

Enter Country Name

Were the Products / Unit previously Halal certified No Yes

Documents Checklist

Kindly attach the following documents to process the application.

- 1) Product List - List of all products which are to be Halal Certified
- 2) Company Profile
 - Product List
 - Company Profile
 - PAN No
 - GST No
 - TAN No
 - Others (Specify)

For Office Use

Date Received	Reference No.
R&D Analyst	Signature