PROCEDURE FOR PROCESSING OF APPLICATION FOR HALAL PRODUCT CERTIFICATION

1. PURPOSE

To ensure proper evaluation, review and recommendation for certification in the halal product certification.

2. SCOPE

This covers planning and conduct of evaluation, review and recommendation for taking certification decision.

3. RESPONSIBILITY

CEO is responsible for defining criteria for evaluation, review and certification decision for management and personnel involved in halal product certification.

Audit Manager / MR is responsible for developing criteria and procedures for evaluation, review and certification decision on application file to HIPL-CD.

TAD is responsible for arranging evaluation, review of findings and certification decision on application file to HIPL-CD

4. PROCEDURE

4.1 Audit Programme

4.1.1 An audit programme for the full certification cycle shall be developed to clearly identify the audit activity/activities required to demonstrate that the client's management system fulfils the requirements of the scheme within a complete certification cycle.

4.1.2 The audit programme shall include a two-stage initial audit, surveillance audit in the first and the second years, and a recertification audit in the third year prior to expiration of certification. The three years certification cycle begins with the certification or recertification decision.

4.1.3 The audit programme and any subsequent amendments shall consider the size of the organization of the client, the scope and complexity of halal certification, products and processes as well as the demonstrated effectiveness of level of management system and the results of any previous audits.

4.1.4 HIPL is considering the certificate or other audits already granted to the client, it shall collect sufficient, verifiable information to justify, and record any adjustments to the audit programme.

4.1.5 The following list contains additional items that can be considered when developing or revising an audit programme, they might also need to be addressed when determining the audit scope and developing the audit plan:

a) complaints received by the certification body about the client;
b) combined, integrated or joint audit
c) changes to the certification requirements;
d) changes to legal requirements;
e) changes to accreditation requirements;
f) organizational performance data (e.g. defect levels, key performance indicators data);
g) relevant interested parties' concerns.

4.1.6 Surveillance audits shall be conducted at least once at least once in 12 months of marked products to assure ongoing validity of the demonstration of fulfilment of product requirements, the date of the first surveillance audit following initial certification shall not be more than 12 months from the certification decision date.

4.1.7 HIPL is taking account of certification already granted to the client and to audits performed by another certification body, it shall obtain and retain sufficient evidence, such as reports and documentation on corrective actions, to any nonconformity. The documentation shall support the fulfilling of the requirements of halal standard/scheme

4.1.8 Where the client operates shifts, the activities that take place during shift working shall be considered when developing the audit programme and audit plans.

4.1.9 The Audit Manager shall establish and maintain the audit programme throughout the certification cycle. Following the certification decision, the Documentation Control Officer (DCO) shall communicate the scheduled surveillance audit due dates, recertification due date, and certification cycle details to the assigned File Manager.

4.1.10 The File Manager shall formally communicate to the client:

- The certification cycle details;
- Tentative audit schedules;
- Surveillance audit windows;
- Recertification audit timelines; and
- Any applicable certification conditions and requirements.

Such communication shall be provided in a timely manner to ensure effective audit planning and coordination with the client.

4.1.11 The Quality Manager shall monitor the effectiveness of the audit programme management process through monthly random verification of certification files. The verification shall ensure that audit programmes are properly maintained, surveillance and recertification schedules are established and communicated to clients in a timely manner, and all related records are adequately documented and retained.

4.2 Determining audit time

4.2.1. In determining the audit time by considering the following aspects:

a) the requirements of the relevant Halal standard/Scheme.
b) complexity of the client and its (internal) management system;
c) technological and regulatory context;
d) any outsourcing of any activities included in the scope of the halal certification,
e) the results of any prior audits;
f) size and number of sites, their geographical locations and multi-site considerations;
g) the risks associated with the products, processes or activities of the organization;
h) whether audits are combined, joint or integrated.

4.2.2. The time spent by any team member that is not assigned as an auditor (i.e. technical experts, Halal Islamic affairs expert, translators, interpreters, observers and auditors-in-training) shall not count in the above established duration of the halal certification audit.

4.3 Planning audits

4.3.1 Determining audit objectives, scope and criteria

4.3.1. 1 The audit objectives shall be determined, the audit scope and criteria including any changes, shall be established after discussion with the client.

4.3.1.2 The audit objectives shall describe what is to be accomplished by the audit and shall include the following:

a) determination of the conformity of the client's halal control and management system as per the (i-CAS) – Halal requirements or parts of it, with audit criteria;
b) determination of the ability of the halal control and management system as per the (i-CAS) – Halal requirements to ensure the client meets applicable statutory, regulatory and contractual requirements;
c) determination of the effectiveness of halal control and management system as per the (i-CAS) – Halal requirements to ensure the client can reasonably expect to achieving its specified objectives;
d) as applicable, identification of areas for potential improvement of the halal control and management system as per the Halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) requirements.

4.3.1.3 The audit scope shall clearly define the extent and boundaries of the audit, the Halal certification body shall specify the exact scope of application in terms of categories of Halal products or services (e.g., primary production of raw materials or intermediate products, processing, or production of packaging materials), in accordance with Annex A of GSO 2055-2:2021, Furthermore, the certification body shall not exclude any processes, areas, products, or services from the scope if they have an impact on the Halal requirements of the finished products

Where the initial or re-certification process consists of more than one audit (e.g. covering different sites), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the certification document.

4.3.1.4 The audit criteria shall be used as a reference against which conformity is determined, and shall include:

a) the requirements of a defined normative document on halal control and management system as per the Halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal requirements

b) the defined processes and documentation of the halal control and management system as per the Halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) requirements developed by the client.

4.3.2 Audit team selection and assignments

4.3.2.1 The certification body shall have a process for selecting and appointing the audit team through nominations by the audit manager. The audit team shall consist of at least two members: one technical auditor and one Halal Islamic affairs expert (including the audit team leader and any necessary technical experts). This process must account for the competence required to achieve the audit objectives and fulfill impartiality requirements.

If the audit team consists of only one auditor, that individual must possess the competence to perform the duties of both a technical auditor and a Halal Islamic affairs expert applicable to that audit.

If the audit team includes external technical auditors or external technical experts, the team must notify the audit manager of any existing or prior relationships with the auditee or the organization assigned for audit.

4.3.2.2 In deciding the size and composition of the audit team, consideration shall be given to the following:

a) audit objectives, scope, criteria and estimated audit time;

b) whether the audit is a combined, joint or integrated;

c) the overall competence of the audit team needed to achieve the objectives of the audit

d) certification requirements (including any applicable statutory, regulatory or contractual requirements.

e) language and culture.

4.3.2.3 The necessary knowledge and skills of the audit team leader and auditors may be supplemented by technical experts, translators and interpreters who shall operate under the direction of an auditor. Where translators or interpreters are used, they shall be selected such that they do not unduly influence the audit.

4.3.2.4 Auditors-in-training may participate in the audit, provided an auditor is appointed as an evaluator. The evaluator shall be competent to take over all duties and maintain final responsibility for the activities and findings of the auditor-in-training. The auditor-in-training is restricted from signing audit-related documents, including the final audit report and non-conformity reports (such as the approval of proposed corrective actions, acceptance of evidence, and approval for the closure of non-conformities). These actions shall be authorized only by the Lead Auditor or the appointed evaluator

4.3.2.5 The audit team leader, in consultation with the audit team, shall assign to each team member responsibility for auditing specific processes, functions, sites, areas or activities. Such assignments shall take into account the need for competence, and the effective and efficient use of the audit team, as well as different roles and responsibilities of auditors, auditors-in-training and technical experts. Changes to the work assignments may be made as the audit progresses to ensure achievement of the audit objectives.

4.3.2.6 The audit team shall ensure that observers do not unduly influence or interfere in the audit process or outcome of the audit.

4.3.2.7 A technical expert shall not act as an auditor in the audit team, the technical experts shall be accompanied by an auditor.

4.3.2.8 The audit team shall ensure that guides do not influence or interfere in the audit process or outcome of the audit.

4.3.3 Preparing the audit plan

4.3.3.1 After the application is registered, a application review for certification depending on the halal categories of the halal product certification and the requirements is prepared including evaluation of the halal control and management system as per the a) Halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) requirements..

4.3.3.2 The audit plan shall be appropriate to the objectives and the scope of the audit. The audit plan shall at least include or refer to the following:

a) the audit objectives
b) the audit criteria
c) the audit scope, including identification of the organizational and functional units or processes to be audited
d) The dates and sites where the audit activities will be conducted, including the audit method (on-site or remote) or specific parts performed remotely during an on-site visit, as well as visits to temporary sites and other remote auditing activities, where appropriate.
e) the expected duration of on-site audit activities, ensuring the audit plan covers all activities. Additionally, the time spent on each activity must be recorded relative to the selected audit method
f) the roles and responsibilities of the audit team members and accompanying persons, such as observers or interpreters.
g) The language used during the audit

4.3.3.3 HIPL-CD evaluation process consists of preliminary inspection (where required) establishment evaluations and review and recommendation for certification and HIPL-CD performs this evaluation through its competent personnel. HIPL-CD ensures all needed information and/or documentation is made available for performing evaluation tasks. The evaluation tasks includes activities in accordance with respective certification scheme/ halal standards/sharia requirement such as documentation review, sampling, testing, inspection, audit, etc. of halal product certification scheme covering general food product.

4.3.3.4 HIPL audit team leader responsibilities to prepare audit plan and communicate with applicant at least 5 working days (excluding Saturday, Sunday and national holyday) before the audit for both stage1 and stage 2 audit.

4.3.3.5 HIPL concern audit team leader shall defined audit objective in audit plan shared to client covering the requirements of audit criteria and requirements which include product safety, evaluation, monitoring, reviewing and Halal standards requirements.

4.3.3.6 The tasks given to the audit team shall be defined by the team leader communication

4.3.3.7 The certification body shall provide the name of and, when requested, make available background information on each member of the audit team, with sufficient time for the client to object to the appointment of any particular audit team member and for the certification body to reconstitute the team in response to any valid objection.

4.3.4 Preliminary visit / Initial certification audit (Stage-1)

4.3.4.1 HIPL-CD organizes a preliminary visit (stage-1) if asked for by the client/ based on halal category by appointing a technical Auditor to gather information for evaluation of applicant's capability to implement the certification scheme. And stage 1 audit should not exceed more than 30% of total audit time.

a) review the client's documents halal control and management system as per the Halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) information.

- Halal policy
- Food safety plan/HACCP and PRP /CCP management
- Management of non compliant products
- Raw material management
- Labeling and packaging
- Personal trainings

b) Applicable statuary and regulatory requirements
c) Evaluate client site specific condition and preparedness for stage 2 audit
d) Client product safety management system documentation and validation and verification program
e) Obtain necessary information regarding the scope of the halal control and management system as per the Halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) requirements including:

- the client's site(s);
- processes and equipment used;
- levels of controls established (particularly in case of multisite clients);
- applicable statutory and regulatory requirements;

e) review the allocation of resources for stage 2 and agree the details of stage 2 with the client
f) Review the client status and understanding about Halal standards requirements of GSO, UAE.S GSO, MS, SJPH and i-CAS Halal.
g) Provide focus for planning stage 2 audit by gaining client management system, Halal standards requirements implementation and normative documents
h) Evaluate internal audit and MRM
i) Documented conclusion regarding full filament objective of stage 1 audit and readiness for stage 2 audit
j) Determine the time for stage 2 audit by means of closing the concern area by client

4.3.4.2 In determining the interval between stage 1 and stage 2, consideration shall be given to the needs of the client to resolve areas of concern identified during stage 1.

4.3.4.3 Based on the stage 1 audit conclusion may also need to revise its arrangements for stage 2. If any significant changes which would impact the halal control and management system as per the (i-CAS) – Halal requirements occur and shall consider the need to repeat all or part of stage 1. The client shall be informed that the results of stage 1 may lead to postponement or cancellation of stage 2.

4.3.4.4 The Auditor/ Inspector submits a preliminary inspection report on the prescribed format (HIPL-CD-PR7.4-01-FM-01) recommending whether the applicant is ready for Facility/Factory audit/inspection (Stage-2) inspection/ audit.

4.3.5 Facility/Factory audit/inspection (Stage-2)

4.3.5.1. HIPL-CD based on the information provided in the preliminary visit (stage-1) required for the Facility/Factory audit/inspection (stage-2) based on category of product report format selected (HIPL-CD -PR7.4-01-FM-01 (01, 02 or 03). A team is then constituted of auditors competent to carry out audit in the halal product categories after ascertaining convenience of the applicant and it is intimated to the applicant for acceptance of the team for the audit. If any valid reasons for change in the team composition are received it is examined on the basis of any conflict of interest.

4.3.5.2 The purpose of stage 2 audit is to verify implementation and effectiveness of client management system and Halal standards (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) requirements.

4.3.5.3 The Audit Team carries out full facility/factory site visit of the products against the requirements covered by the scope defined in its application including requirements specified in the halal standards (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) / halal certification schemes. This includes among other things the following:

a) Information and evidence about conformity to all requirements of product safety and halal control system as per the halal standard (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal) or other normative documents.

b) Performance monitoring, measuring, reporting and reviewing against key performance objectives and targets.

- Animal Reception & cleaning
- Stunning
- Slaughtering
- Skinning
- Evisceration
- Maturation
- Deboning
- Primary packaging
- Storage room
- Visit to different functional areas comparing the organization set provided.
- Establishing legal entity of the premises.
- Establishing technical competence of personnel engaged in the manufacture of the product.

- Establishing competence of quality control personnel,

c) Operational control of process

d) Internal audit and MRM

e) Management responsibility of client halal policy

4.3.5.4 Confirmation of the status of findings of the previous review or audit for product safety management system and halal requirements as per the (MS, GSO, UAE.S GSO, BPJPH & i-CAS) which is already audited and fully implemented during stage 1 audit many not need to audit again (if applicable)

4.3.5.5 The team will take samples for independent testing in accordance with HIPL-CD - G7.4-01 Guidelines for Drawl, Coding, Sealing and Dispatch of Samples or personally bringing to HIPL-CD.

4.3.5.6 A brief report of the evaluation, especially indicating the non-conformities, is provided to the client as categorized below:

- **Critical Non-conformities:** Such as invalid regulatory and legal documents.
- **Major Non-conformities:** Which affect the halalness of the system, such as periodically not updating approved vendor or product specifications.
- **Minor Non-conformities:** Such as lack of personal hygiene and sanitation, like missing health examinations.
- **Observations:** Which do not affect the system but repetition of which may lead to minor non-conformities (e.g., temporary non-availability of hand sanitizer, but the marking for the same was done).

Based on the nature of the non-conformities, the client is to carry out root cause analysis and ensure appropriate corrective and preventive actions are submitted within a reasonable timeframe.

For Critical and Major Nonconformities with significant risks, faster action may be required than for minor ones. Complex issues may require more time for investigation and development of effective corrective actions.

Critical Nonconformities which involve Shariah and Technical matters may lead to the immediate revocation of the Halal Certificate.

4.3.5.7 Depending on the nature of nonconformities and if the client expresses interest in continuing the certification process, HIPL-CD shall decide whether additional evaluation tasks needed to verify that nonconformities have been corrected at site. Appropriate, competent person(s) within the HIPL's internal resources shall be authorised to take this decision.

4.3.5.8 The audit team submits its report on the prescribed format within a week for taking subsequent application processing steps.

4.3.6 Review and recommendation

4.3.6.1 HIPL-CD assigns at least one person to review all information and results related to the evaluation. The review shall be carried out by personnel who have not been involved in the evaluation activities.

4.3.6.2 The results of all evaluation activities as given below shall be documented prior to review. This documentation can provide opinion whether product requirements have been fulfilled:

a) Preliminary inspection report,
b) Facility/Factory technical audit report,
c) Report of samples tested in an independent laboratory, when required.

4.3.6.3 the information provided by the audit team is sufficient with respect to the certification requirements and the scope for certification

The reviewing officer submits review report including recommendations for being considered by the Certification Decision Committee/ Mark Committee (See HIPL-CD - PR7.6-01).

4.3.6.4 HIPL do not out sourced the certification evaluation process and if HIPL rely on evaluation result related to halal certification completed prior to the application for certification, HIPL will verify and take responsibility for the results and satisfy itself that the HCB (halal certification body) that perform halal certification evaluation fulfil the requirements as specify in scheme /Halal standards (GSO, UAE.S GSO, MS, SJPH and i-CAS Halal)

4.3.6.5 HIPL shall ensure that the root cause analysis and CAPA provided by the client are reviewed by the concerned auditor. The verification of the audit report, product sample test reports, and other relevant documents shall be carried out by the post-audit technical reviewer.

The reviewer shall ensure that all raised nonconformities are closed and that the effectiveness of corrective actions, along with their implementation evidence, is adequately evaluated and reviewed.

The reviewer shall also confirm whether nonconformities are fully or partially closed, as applicable. Additionally, the reviewer shall ensure that any recommendations made by the audit team for follow-up actions are addressed within the defined timeline. Furthermore, the actions to be taken based on the nature of the nonconformity shall be clearly specified in the post-audit evaluation report.

4.3.6.6 The post-audit report shall be submitted to the Certification Decision Committee as per procedure (HIPL-CD-PR7.6-01), ensuring that the certification process is completed within the defined timeline specified in Annex A

5. REFRENCES

HIPL-CD-PR7.2-01 Procedure for Receipt, Review and Registration of Application
HIPL-CD -PR7.6-01 Procedure for Grant of Certification
HIPL-CD -PR7.4-02 Procedure for Calculation of Man Days for Technical Audit
HIPL-CD -GL7.4-01 Guidelines for Drawl, Coding, Sealing and Dispatch of Samples
HIPL-CD -PR7.4-01-FM-01 Form for Report Format for Preliminary Inspection
HIPL-CD -PR7.4-01-FM-02 Form for Nomination of Team Leader/Audit Team Product Certification
HIPL-CD-PR7.4-01-FM-03 TECHNICAL AUDIT PLAN
HIPL-CD -PR7.4-01-FM-05 (01) Form for Facility/Factory Technical Audit/Inspection Report for Food Manufacturing
HIPL-CD -PR7.4-01-FM-05 (02) Form for Facility/Factory Technical Audit/Inspection Report for chemicals
HIPL-CD -PR7.4-01-FM-05 (03) Form for Facility/Factory Technical Audit/Inspection Report for Cosmetics and Personal Care.
HIPL-CD -PR7.4-01-FM-09 Form for Nonconformity Report
HIPL-CD -PR7.4-01-FM-10 Form for Request for Analysis
HIPL-CD -PR7.4-01-FM-11 Form for Review and Recommendation for grant of License/ certificate
HIPL-CD -PR7.4-01-FM-12 Form for Product Certification Marks Decision
HIPL-CD-PR7.4-01-FM-11 FORMAT FOR THE CERTIFICATION DECISION

AMENDMENT SHEET

SL. No	Changes Incorporated	Page	Revision Status	Date	Remarks if any
1.	Amendment in clause 4.3.5.6	08	01	28.12.2024	Define the Non-conformities and its CAPA duration.
2.	Incorporate in clause 4.2.2	02	02	10.04.2026	Include Halal Islamic affairs expert is not count in man-days
3.	Incorporated in clause 4.3.1.3	03	02	10.04.2026	Include the clause 9.1.1 requirement of GSO 2055-2

4.	Incorporated in clause 4.3.2.1	04	02	10.04.2026	Mentioned mandatory of Halal Islamic affairs expert in audit team.
5.	Incorporated in clause 4.3.2.4	04	02	10.04.2026	Mentioned control and restriction of auditors-in-training in audit team.
6.	Incorporated in clause 4.3.3.2 (d)	05	02	10.04.2026	Mentioned method of audit in audit plan
7.	Incorporated in clause 4.3.3.2 (e)	05	02	10.04.2026	Mentioned audit plan should cover the time spend on all activity relative to audit method
8.	Amendment in clause 4.3.3.2 (g)	05	02	10.04.2026	Mentioned audit plan should cover the language used during audit.
9.	Incorporated in clause 4.3.6.5	10	02	10.04.2026	Mentioned reviewer shall also ensure nonconformities are fully or partially closed
10.	Amendment in clause 4.3.6.6	10	02	10.04.2026	Define the submission of post audit report to CDC and ensure certification process time line as per the annex A.
11.	Amendment of Annex A	12	02	10.04.2026	Define timelines for certification process
12.	Amendment in clause 4.1.9	04	03	11.05.2026	Audit manager responsible to maintain audit programming
13.	Amendment in clause 4.1.10	04	03	11.05.2026	Requirements to be communicated with client by file manager about certification cycle
14.	Amendment in clause 4.1.11	04	03	11.05.2026	Quality manager monitoring and verification of audit programming

Annex – A

Timelines for certification process

SL. No	Application Process		Time Norms
1.	Application Scrutiny and Registration (from the date of receipt of application)		2 to 3 days
2.	Perform application Review (Initiate the first communicate with client as per the applied product, process, ingredients, scope, standard and region export)		2 to 3 days
3.	Client respond to application reviewer and submission of required documents		2 to 6 weeks
4.	Competition of application review		2 to 3 days
5.	Quotation and Draft agreement to client		1 day
6.	Confirmation of quotation and signing certification and trade mark agreement		2 to 7 days
7.	Stage 1 audit team nomination and client confirmation		3 to 5 days
8.	Report of stage 1 audit (from date of the stage 1 completion and NC closer)		1 week
9.	Stage 2 audit team nomination and client confirmation		3 to 5 days
10.	Report of stage 2 audit (from date of the stage 2 completion and NC closer)		1 week
11.	Client respond to finding		
	Critical NC	Proposed Corrective Actions	Within 5 days of the date on which the NC is observed by the Audit team
		Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the Audit team
	Major NC	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the Audit team
		Submission of evidence of implementation of accepted Corrective Actions	Within 20 days of acceptance of proposed corrective actions by the Audit team
		Closure of NC	Within 60 days of the date on which the NC is observed by the Audit Team
	Minor NC	Proposed Corrective Actions	Within 15 days of the date on which the NC is observed by the Audit team
		Implementation of Corrective Actions and closure of NC	Within 60 days of the date on which the NC is observed by the Audit team
	Observation	Evidence of implementation will be verified during	-

		next surveillance	
12.	HIPL Response on Findings		
	Critical NC	Proposed Corrective Actions	Within 5 days from the receipt
	Major NC & Minor NC	Proposed Corrective Actions	Within 10 days from the receipt
		Evidence of implementation of accepted corrective actions	Within 15 days from the receipt
13.	Perform Technical Evaluation (Post Audit – Review) (After submitting of Stage 1 and Stage 2 audit report along with the NC closer and evidence)		5 to 7 days
14.	Submitting of Post audit report to CDC		1 to 2 days
15.	Formation of Certification decision committee (CDC)		1 to 2 days
16.	Announcement of decision of CDC		1 to 2 days
17.	Halal certificate with annexure list issue to client (after clearance of complete payment)		2 to 3 days
18.	HIPL share the Audit program to client as per the certification cycle		1 week
19.	HIPL ensure that Surveillance process is completed (as per the certification cycle, before surveillance due date mentioned in the halal certificate)		Before due date
20.	Recertification application to be received from client		6 months before date of expire of halal certificate
21.	Recertification process completion and grant of renewal certificate		Before the expire of current certificate