



Application Form

**Section 1: Applying for:**

New Client	<input type="checkbox"/>
Scope Extension	<input type="checkbox"/>
Recertification	<input type="checkbox"/>

**Section 2: Organizational Details**

Name of Company				
Brand Name(s)				
Manufacturing Unit(s) Address				
Name of Products				
Define scope of certification <i>e.g. Processing of sliced pre-packed pineapple and pineapple in cans</i>				
No. of products	Total number of employees	No. of Sites	No. of Shifts	
			Morning <input type="checkbox"/>	Evening <input type="checkbox"/>

**Section 3: Certification Required**

Halal Certification PS:3733:2022	<input checked="" type="checkbox"/>
Quality Management System ISO 9001:2018	<input type="checkbox"/>
Food Safety: FSSC 22000	<input type="checkbox"/>
HACCP	<input type="checkbox"/>

**Section 4: Consultancy**

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Revision no:	00	Issue date:	01-01-2023	Approved by:	Muhammad Awais Khan



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HACCP Study	<input type="checkbox"/>
Document Preparation Assistance	<input type="checkbox"/>

*Section 5: Applicant Details*

Name of Applicant		Designation	
Email Address		Mobile Number	
Signature		Date	

*Section 6: For Office Use Only*

Reviewer Name:			
Designation:			
Comments			
Signature		Date	

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