

**The Islamic Food and Nutrition Council of America
(IFANCA)**



Asia Pacific Office:
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HALAL CERTIFICATION APPLICATION FORM

I) COMPANY PARTICULARS

Company Name (公司名称): _____

Address (地址): _____

Tel. No (电话号码)

Fax No.(传真号码)

Email Address (邮箱地址)

Website (网址)

Application Authorized By (批准人): _____

Name (名字)

Date (日期)

Title of Above Individual (批准人的职位): _____

Location of plant(s) (产品出厂地址): _____

Contact person at plant (工厂联系人): _____

Name (名字)

Title (职位)

Tel. No. (电话号码)

Fax. No.(传真号码)

Email Address (邮箱地址)

II) PRODUCT INFORMATION (产品资料)

Brand Name of Product to be certified. Attach separate sheet as needed

(产品保证书名称 如果需要附加一项不同的):

Nature of Product (产品种类): _____

Countries where product is/will be marketed (在哪个国家销售):

USA Canada Malaysia Indonesia Singapore Saudi Arabia UAE Egypt

Pakistan Others _____

III) LIST OF INGREDIENTS

Please provide information about each ingredient, including specification sheets and suppliers. Attach separate sheet.

(请提供产品成分资料,包括供应商产品资料说明一份. 如果需要附加不同的一项)

注释: IFANCA agrees the information submitted will be dealt in **strict confidentiality** and will not be used for other than evaluating this product for certification.