



HPDS  
HALAL PRODUCT  
DEVELOPMENT SERVICES  
AUDIT & CERTIFICATION

## HALAL PRODUCT DEVELOPMENT SERVICES APPLICATION FOR HALAL SUPER VISION AND CERTIFICATION

Date:

Plant Name:

Web:

Address:

City:

Province:

Postal Code:

Phone#:

Fax:

Toll free:

E-mail:

Plant Contact:

Title:

Phone#:

E-mail:

Alternate contact:

Title:

Phone#:

Email:

Location of Plant:

Plant Establishment:

Please indicate the closest major city/town to the facility:

Please indicate the geographic areas here you plan to market your product:

North America:

Europe:

Asia:

Africa:

Australia / New Zealand:

Other:

Category/Brand name of product(s) to be certified:

Nature of product(s) to be certified:

Describe all the manufacturing processes in the plant:

List of ingredients:

please provide information about each ingredient including specification sheets and suppliers. Attach a separate sheet as needed.

Application Authority:

Title:

Date:

Signature:

Print Name:

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