



مجلس الأئمة الفقيهِ الأسترالي

ANIC HALAL AUTHORITY

Australian National Imams Council | ABN: 66 122 669 318

APPLICATION FORM FOR HALAL ACCREDITATION SERVICE

APPLICATION DETAILS

Company Name	<input type="text"/>		
ABN Number	<input type="text"/>		
Address	<input type="text"/>		
Telephone	<input type="text"/>	Fax	<input type="text"/>
Website	<input type="text"/>	Email	<input type="text"/>
Type of Business	<input type="text"/>		
Service Required	<input type="text"/>		
Target Markets	<input type="text"/>		
Referred By	<input type="text"/>		

DECLARATION

I declare that the particulars supplied in this application form and in the supporting documents attached herewith, are true and correct to the best of my knowledge. That no pertinent information or fact has been willfully pressed or withheld.

Full Name: _____

Position: _____

Signature: _____

Date: _____

OFFICE USE ONLY

Date Received: _____

Approved: Yes No

Details of Decision: _____

Notified: Yes No

Date: _____

PRODUCT DETAILS

In case of applying Halal Certificate for an Abattoir/Slaughter houses or meat processing company. Please state the following information:

<input type="checkbox"/> Abattoir	<input type="checkbox"/> Boning Establishment	<input type="checkbox"/> Distribution Centre
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Intended Market: Domestic Market International Market

What speices is slaughtered by your organisation? Beef Lamb/Goat Poultry Turkey

No. of Animals slaughtered per day: Establishment No. No. of Employees

PRODUCTS LIST

In case of applying for Halal Certificate for processed food/Restaurant or pharmaceutical /cosmetics products, please include the following information for each product requires Halal Certificate.

Products	Supplier of Ingredients	Halal Certificate (Number and Date)	Animal Based?
Product Name: Ingredient(s) Used:			

Note; Additional page could be added for further relevant information