



FIJI MUSLIM LEAGUE BOARD OF CONSUMER AFFAIRS

APPLICATION FORM FOR SCHOOL CANTEEN HALAL CERTIFICATION

I. PARTICULARS OF APPLICANT				
Name of Establishment			NEW ___ RENEWAL ___	
Postal / Office Address		Type of Business :		
Outlet Address		Size of Premise : * sq ft / m		
Contact Person		Tel No (Office) : Fax No :		
Designation:		Tel No (Outlet) : Fax No :		
		Operating Hours		
		Sch Reg No:		
2. PARTICULARS OF PERMANENT MUSILM STAFF				
Name	Date Joined	Designation	Working Hours	Tel No (Home)
1				
2				
3				
4				
5				
6				
3. DECLARATION BY APPLICANT				
I declare that the particulars in the application form and supporting documents, to the best of my knowledge and belief, are true and that I have not withheld any material facts which are requested for in this application.				
..... Authorized Signature				
..... Name/Tel. No.	 Application Date	 Branch Stamp
4. FOR OFFICE USE ONLY				
Date Received				
Date acknowledgment of application				
5. APPLICANT IS TO PROVIDE THE FOLLOWING INFORMATION AND ATTACH THE NECESSARY SUPPORTING DOCUMENTS				
1. Halal Certificates of products sold currently.		2. Relevant Supporting Documents (names of suppliers, Layout of the Canteen,		
6. ANY OTHER RELEVANT INFORMATION				

7. LIST OF PRODUCT BRANDS / ITEMS APPLIED FOR	
1	11
2	12
3	13
4	14
5	15
6	16
7	17
8	18
9	19
10	20
NUMBER OF PRODUCTS / ITEMS APPLIED FOR: _____	

FIJI MUSLIM LEAGUE

DECLARATION

BY PRODUCT SUPPLIER OR PROPRIETOR SEEKING HALAL CERTIFICATION AND HALAL ACCREDITATION FROM FIJI MUSLIM LEAGUE

I, *(Proprietor's name)*,-----
(position held-CEO/G M),-----

hereby state that my business Processes and Operations fully comply with the **Islamic Shariyah Laws** and as such, I take fully responsibility for the following:

1. That Muslim Community can without any fear or doubt utilize/consume the products/ services being offered by

(Organization Name) -----

situated at *(exact Location)*,-----

2. That I have taken all necessary measures to ensure that all related raw materials/ ingredients for the above-mentioned process/services have been obtained from Halal source as per the Islamic Shariyah Laws, taking into account that there is no contact or cross contamination with non-halal materials.
3. That all the documentations/information provided to Fiji Muslim League, the Halal Certification Body, are correct in all respects.

Should I, (Full Name) -----

of (Organization Name) -----

fail to comply with the Islamic Shariyah Laws in any way regarding this product, I will notify the Fiji Muslim League (Halal Certification Body) immediately, as the continued supply of the product under Halal certification is an offence.

4. In the event that the Fiji Muslim League finds information contrary to this declaration insofar as the Processes, Operations, documentations or any other material evidence, the League has the full right to revoke my Halal Certification in writing and may take any action, including legal action, Fiji Muslim League may deem necessary.
5. In the event of **Non-Renewal, Revoked** or **Withdrawn** of the Halal Certificate, Fiji Muslim League has the right to advise the consumers through media and public announcements.

6. The Company/ outlet shall permit only authorized Fiji Muslim League Board of Consumer Affairs Auditors with valid identification to enter and carry out surprise inspections without prior notification as long as there is no disruption to work, the daily routine is not disturbed and inspections are not abused by the members of the Board of Consumer Affairs.
7. The company shall notify FML and get approval for any additional ingredients/ products or item added to the existing list.
8. Each time the company makes an application for renewal, it shall submit a completed application form together with declaration form with all relevant information required.
9. For the renewal of the certificate, the company must apply 30 days prior to the expiry date of the existing certificate.
10. The company must inform the FML if there is any changes in the location of the processing premises.

Full Name: _____

Organization: _____

Date: _____

(Company seal/Stamp)

Fml/bca/dox1