

HALAAL ASSOCIATION OF ZIMBABWE

APPLICATION FORM FOR HALAAL REGISTRATION & CERTIFICATION

Name of Company as per registrar of companies (please attach copy of certificate of incorporation)

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Year of commencement of operation in business.

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Exact location of registered offices of the company.

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Trading name of the company.

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Exact location of the outlet.

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What does the organisation specialise in?

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Full ID nos. And contact nos. of all Directors/ owners.

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Full list of shareholders with percentages shareholding.

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Full name ID no. And contact no. of the CEO/ managing Director

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Who is responsible for the day to day running /operations of the organisation? (Manager) etc, please include contact details as well as those of the second in charge.

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What are the days and timings for the operation of the organization?

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Why does the company feel it necessary to apply for halaal registration?

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Does the company/ organization hold halaal registration/ certification with/ from any other Islamic body or organization? If yes, give details (name, address, year etc.)

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In the event of any halaal related problem, how does the company propose to tackle the issue?

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Can you give assurance that your employees and yourselves will respect and uphold the halaal agreement at all times?

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DECLARATION

On behalf of..... (Company name.)

Ideclare that all the information given is true and correct and I understand that if any information is found to be incorrect, the application will not be considered. In the case the information is found to be incorrect, the registration will be cancelled by the Halaal Association of Zimbabwe and certification withdrawn immediately.

I also understand that the company cannot approach any other Islamic body or organisation for halaal certification during the validity of the certification with the Halaal Association of Zimbabwe.

Full name(in block capitals).....

Position in company.....ID no.....

Signed..... Dated.....

Witnesses 1)..... 2).....

Stamp.....

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NB.. *KINDLY ATTACH THE LIST OF RAW MATERIALS AND THEIR SUPPLIERS.*