



Kosher Certification Supplier questionnaire and confirmation sheet
Questionnaire on raw materials, additives & production methods

KOSHER_FR_012

To be completed by KOSHER CERTIFICATE HOLDER:

KOSHER certificate holder / company name:		Industry:
Item number of raw material, additive or auxiliary substance:	Item name of raw material, additive or auxiliary substance:	Chemical name of raw material, additive or auxiliary substance:

To be completed by SUPPLIER. Important: Please fully complete this form.

Company name:		Branche:
Item number.:	Item name:	Item group:
Address of supplier (address, country post code, city):		Quality manager:
Telephone:	Fax:	Email:

This document verifies halal conformity and the suitability of the above mentioned item for halal production. Please carefully check all the respective boxes and attach the required documents and information to the questionnaire. It is necessary to attach a copy of the current PRODUCT SPECIFICATION to the questionnaire. We thank you for your kind cooperation.

Please tick as appropriate		YES	NO
01	Is there an audit report on issuing the Kosher certificate? If so, please attach a copy of the audit report.	<input type="checkbox"/>	<input type="checkbox"/>
02	Has the above-mentioned item already received a Kosher certification? If so, please attach a valid copy of the Kosher certificate.	<input type="checkbox"/>	<input type="checkbox"/>
03	Does the item contain raw materials of animal origin? If so, name of raw material: _____	<input type="checkbox"/>	<input type="checkbox"/>
04	Does the item contain ethanol or intoxicating alcohol or has ethanol or intoxicating alcohol been used in the production of the item? If so, name of raw material: _____	<input type="checkbox"/>	<input type="checkbox"/>
	If so, alcohol of which variety/origin (alcoholic drinks, from alcoholic/distilled drinks, alcohol for industrial purposes, etc.) has been used): _____	<input type="checkbox"/>	<input type="checkbox"/>



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YES NO

05	Were raw materials of animal origin or alcohol used in the production, packaging or storing of the items? If so, name of raw material: _____	<input type="checkbox"/>	<input type="checkbox"/>
06	Were enzymes/proteins of animal origin or microbial enzyme used to manufacture the items? If so, name and origin of the enzyme: _____ Please enclose a written statement/explanation by the enzyme manufacturer.	<input type="checkbox"/>	<input type="checkbox"/>
07	Were any manufacturing auxiliaries and/or bases used? In particular for extraction, coating-, enveloping, precipitation process, etc.? If so, name of raw material: _____	<input type="checkbox"/>	<input type="checkbox"/>
08	Does the item contain any forbidden raw materials, as defined by Kosher certification? If so, name of raw material: _____	<input type="checkbox"/>	<input type="checkbox"/>
09	Are conventional products also manufactured on the same production line where the above mentioned item is also manufactured? If so, name of items: _____	<input type="checkbox"/>	<input type="checkbox"/>
10	Is the production room during the manufacturing process of the above mentioned item free from foreign dust and/or pollution? If so, name of raw material: _____	<input type="checkbox"/>	<input type="checkbox"/>
11	The production plants and their surfaces are cleaned as follows (multiple answers are possible): <input type="checkbox"/> completely wet <input type="checkbox"/> dry only <input type="checkbox"/> mix of wet and dry <input type="checkbox"/> Ethanol disinfection <input type="checkbox"/> Other: _____		

Date

Signature Quality Manager

Corporate stamp