



APPLICATION FORM

HALAL PRODUCTS MANAGEMENT SYSTEMS & Requirements for Any Organization in Halal Food, Packaging Material Personal Care Products & Pharmaceuticals.

Punjab Halal Development Agency

Beside Shahpur Kanjran Cattle Market
18-K.M. Shahpur Kanjran, Multan Road, Lahore

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Punjab Halal Development Agency

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

Please complete the Application Form and mail / Email it to the address shown above, we will then submit a quotation / Performa Invoice tailored exactly to your situation, the information provided shall be treated with strict confidence. **No application fee shall be charged for this application.**

COMPANY DETAILS

Company Name:										
Company Registration No.										
Company NTN No.										
Company Address:										
Site Address: (If different)										
Tel No.:				Cell #:						
Email:				Website:						
Contact Person:			Designation			Cell #:				
Management Representative (MR)				Cell #:						
Standard (Tick ✓)	PS		MS		Other		Accreditation	PNAC	JAKIM	Other
	3733		1500							

Products and Services (Please detail the products you produce and the services you provide)

Activities and Processes on site: (Please list down all site activities)

Halal Certification Scope (Please note this description shall show on the certificate after approval by PHDA)

Product/Brand to be certified:

List of Products/Brands: (Use Annexure-I Format)

Total No. of Employees:

Management / Admin		Production /Process		Food Safety/ Quality		Sharia / Halal	
Permanent		Temporary		Seasonal		Subcontracted	

No. of Shifts		Specific Activities	
Total No. of Employees		No. of product Varieties.	
1st Shift - No. of Employees		No. of production lines	
2nd Shift - No. of Employees		No. of buildings	
3rd Shift - No. of Employees		No. of warehouses / Store	



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Product Process Flow (Attached please)

List of subcontracted activities: (i.e. Machining, calibration, delivery/logistics, Pest, Lab, etc.)

List of Halal Control Points / Hazards & Risks in Activities. (Attached Halal Risk Assessment Please)

List of any other existing certified management System: (HACCP / ISO 22000 / ISO 9001 / Etc.)
(Attached Certificates Please)

Preferred date for Audit:

Note: Kindly ensure prior facilitation on the above items:

1. Kindly endorse the application with company stamp.
2. Please return completely filled application form together with the required full disclosures through email (info@phda.com.pk) or post to the office address.
3. MR should be the company employee.
4. Application forms will only be accepted when fully completed and duly signed by the Proprietor /Director or authorized representative. Failure to adhere to the above guidelines, may delay the process.

Declaration: I/we undertake that the information provided for Halal Certification is based on real practices. We also undertake that we will prior inform to PHDA if any change occur in the formulation hereafter.

Authorized Signature		Company Stamp	
Position		Date	

THANK YOU FOR COMPLETING THE APPLICATION FORM

FOR PHDA USE ONLY

Reviewed by Deputy MR		Remarks: Date	
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Technically Reviewed by Relevant Sector Technical Expert		Remarks: Date	
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ANNEXURE-I

List of Products/Brands

No.	Product / Brand Name	Description	Major Ingredients to be used
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			



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Government of the Punjab (Pakistan)
Website: www.phda.com.pk Email: info@phda.com.pk



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Certification / Registration Required:

Code Allocation:

Scope of Certification	
Category (As per PNAC Guideline)	
Sector Qualification Code (s)	

Recommended Team and Team Leader:

Approved HPMS-LA and Team members (if any), and covering the needed codes

Audit Type	Audit Team Members	Expected Time of Audit / Sign
Stage I On / Off-Site		
Stage II		
Surveillance I		
Surveillance II		



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Calculation: (For PHDA Use Only)

1. Calculation of MD for initial audit:

i. Minimum audit time for single site: $T_s = TD + TH + (TPV + TFTE) * CC$

TD is the basis on-site audit time, **TH** is the audit days for each additional HACCP/Halal CCP product group studies and applied only for products/services/processes group in food-chain. **H** is considered "0" when company has 1 HACCP/Halal CCP study. For each additional study, number of audit will be increased, for other type of products/services/processes it can be taken as "0", **TPV** is the audit days for product variety **TFTE** is the number of audit days per number of employees. **CC** is the factor as multiplier for process or production complexity class.

ii. Minimum audit time for each additional site: $T_{asv} = T_a * 50/100$

2. MD allocation (Certification / Re-certification):

Subject	TA (on-site)			
	Stage 1 On / Off -Site	Stage 2 On-Site	Surveillance 1	Surveillance 2
MD Allocation				

Note: The minimum time includes stage 1 and stage 2 of the initial certification audit but does not include the time for preparation of the audit nor for writing the audit report.

3. Comments (if any):

3. The MD- and code allocation is performed by:

Position: _____

Sign and Date: _____

Approval by Manager Commercial/MR:

1. The code allocation above is performed correct: YES NO

2. Comments (if any):

3. Sign:

Date