

## SECTION A : SLAUGHTER HOUSE

Is this plant currently Zabīha Certified by any organization?  Yes  No if yes, then state the name and address of the organization.

PLEASE TYPE FULL NAME OF THE CERTIFYING ENTITY

Address: \_\_\_\_\_

STREET ADDRESS / P.O.BOX / APT #

CITY

STATE

ZIP CODE

**Business Hours:** Please state business working days and hours in the chart below. Enter hours of all the shifts this plant runs in a week

DAYS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS							

**Plant Capacity:**

Maximum number of livestock this plant can slaughter in a day: \_\_\_\_\_

Total number of livestock this plant slaughter per day: \_\_\_\_\_

Total number of Muslim employees working specifically in the slaughtering area of the plant: \_\_\_\_\_

**Non-Zabīha Slaughtering:** Is non Zabīha done at this plant?  Yes  No If yes, then provide information below

DAYS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS							

Types of Non-Zabīha Livestock slaughtered at this plant:  Cow  Lamb  Goat  Other Specify: \_\_\_\_\_

**Livestock Slaughter Detail:**

S/N	LIVESTOCK	QUANTITY / DAY
1		
2		
3		
4		
5		

**Slaughtering Plant Inspection:**

Is the plant USDA Inspected?  Yes  No if yes, then state the Plant ID: \_\_\_\_\_

**Processing Facility:**

Does this plant process carcass after slaughter?  Yes  No if yes, then complete **Form B: Processor**

**Distribution:**

Does this plant distribute carcass or processed meat to distributors, retailers, or restaurants?  Yes  No

If yes, then complete **Form C: Distributor**

**Strictly Confidential:**

**Islamic Social Services**, undertakes to treat all information supplied by or obtained from the application in respect of its processes, trade secrets, and operations in the strictest confidence and will not divulge such information for the benefit of any other person or company.

The Halal Zabīha Certification services are free for the benefit of Muslim Ummah

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Provide Slaughter-man information in the chart below:

S/N	FULL NAME	SECT: <b>SUNNI</b> , IF OTHER SPECIFY	PHONE NUMBER

Please write all the necessary steps that are being utilized in slaughtering an animal. Use one box per step. Make additional copy of this page if more boxes are required.

Step 1

Step 2

Step 3

Applicant Name

Position

Signature / Date