

	<p>Badatz Portugal</p> <p>Kashrut Department</p>	<p>בד"ץ פורטוגל מחלקת הכשרות</p>
<p>Antiga Praça Municipal, Lj 7, Rua dos Trez Lagares Fundão, 6230-421 – Portugal www.badatzportugal.com - info@badatzportugal.com</p>		

APPLICATION FORM

BKP KOSHER CERTIFICATION SERVICES

Date:

Name of firm:

Address:

Telephone number:

Fax number:

E-mail address:

Item(s) for which certification is to be applied:

Address of specific manufacturing facility of products certification is applied for:
(Please list all plants where product is made)

Telephone number(s) at manufacturing facility:

Fax number(s) at manufacturing facility:

Name of the person authorising this application:

Please include the following information:

1) Have any of your products ever been certified as kosher? If yes, by whom?

2) Are any other products, other than the ones applied for, produced in the same facility? If yes, please describe them.

3) Describe all the manufacturing process(es) in the facility

4) Please list all ingredients used in the manufacture of the product(s) under application, including the source(s) of supply of each specific ingredient :