



STAR-K KOSHER CERTIFICATION

COMPANY DATA FORM

Date _____

COMPANY INFORMATION

Company Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Mr. Mrs. Ms. Dr.

_____ Contact Name Title Email

Work Phone _____ Mobile _____ Website _____

Is above contact person authorized to sign a contract agreement? Yes No If not, who is the authorized person? _____

_____ Contact Name Title Phone Email

PRODUCTION PLANT INFORMATION

Please use a separate form for each plant where products are made

Plant is owned by above company Plant is a contract manufacturer for the above company

If plant is a contract manufacturer: Plant does not have Kosher certification Plant is currently Kosher certified by _____

_____ Name of Plant

_____ Address

_____ City _____ State/Province _____ Zip/Postal Code _____ Country _____

Mr. Mrs. Ms. Dr.

_____ Contact Name Title Email

_____ Work Phone _____ Mobile _____ Website _____

ADDITIONAL INFORMATION

Is your company currently Kosher certified or have you previously been Kosher certified? If yes, by whom? _____

Does your company have any 3rd party certifications (eg. SQF, BRC)? If yes, please list. _____

Is heat used at any point in the production process? If yes, briefly describe how heat is used. _____

Does your company co-manufacture or produce private-labels on behalf of other companies? If yes, please list these on page 2 under Brand Information. _____

Are you currently Organic certified? If yes, by whom? If not, are you interested in Organic certification? _____

