

FLORIDA K**Vaad hakashrus of Orlando**

Rabbi Sholom B. Dubov

708 Lake Howell Road, Maitland, Florida 32751

Phone 407-644-2500 ♦ Fax 407-644-7763

KOSHER CERTIFICATION APPLICATION**This Application Form is for a Transport Company****Instructions:**

Please fill out all of the questions in this application. If the question does not apply, write N/A, and explain if necessary. Make copy of completed signed for your record and return original to the address above. Please include all filling fees.

I. General Company Information:

Date of Application: _____

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Additional Address (different from Mailing Address): _____

City: _____ State: _____ Zip: _____

Company Kosher Liaison: _____

General Manager: _____

Transportation Manager: _____

II. Kosher Information:

Were you referred to the FKS _____ Yes No
if yes by whom? _____

Which of the following Kosher services do you wish to have?

 Consultation Visit Initial Inspection Fleet Certification Single Transport Certification Special Certification Passover CertificationDo you wish to have other locations certified as well? Yes No

Was this Company ever certified Kosher? Yes No
if yes by whom? _____

(Include copy of previous letter of kosher certification with application)

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III. Product Information

Please list products that are hauled by your company:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____
21. _____
22. _____
23. _____
24. _____
25. _____
26. _____
27. _____
28. _____
29. _____
30. _____

Use additional paper for more items (if necessary)

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IV. Ingredient Information

Are the following products transported by your company: (list company of origin)

Circle the H if product is shipped hot - In excess to 110° F

Alcohol?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Animal fat?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Chemicals?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Chocolate?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Corn Syrup?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Dairy Products?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Gelatin?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Grains?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Grape?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Eggs?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Juices?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Milk?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Molasses?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Oils?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Rum?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Shortening?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Stabilizers?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Vinegar?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Wine?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H
Yeast?	<input type="radio"/> Yes	<input type="radio"/> No	Company _____	H

Does your company have its own tank wash facility? Yes No

Where are your tankers washed? _____

What standards does your company have regarding the cleaning process? _____

* Please attach list for additional information regarding the above which may - in your opinion - be relevant to Kosher Certification.

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V. General Comments

Please include any comments that may be pertinent to this kosher application:

V. Signature

Signature Required by Company Representative:

Signature: _____

Print Name: _____

Position: _____

Date: _____



Prepared exclusively for the use of FLORIDA KOSHER SERVICES.

All other uses are unauthorized.

Return this form by mail with all necessary information and application fee to:

Florida K- Rabbi Sholom B. Dubov

708 Lake Howell Road

Maitland, Florida 32751 - USA