



**MINISTRY OF AGRICULTURE
DIRECTORATE GENERAL OF LIVESTOCK AND ANIMAL HEALTH SERVICES
DIRECTORATE VETERINARY PUBLIC HEALTH**

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**APPLICATION FORMS FOR PET FOOD ESTABLISHMENT APPROVAL IN
COUNTRY WISHING TO EXPORT PET FOOD PRODUCTS TO INDONESIA**

Note :

This guideline sets out the information on pet food establishment required by Directorate of Veterinary Public Health, Directorate General of Livestock and Animal Health Services (DGLAHS), Ministry of Agriculture of Republic of Indonesia for evaluation to export pet food products to Indonesia. Pet food in this guideline refers as pet food containing animal products. Please include any additional information and photographs to support your application.

Inadequate/incomplete submissions may result in delay in processing.

All information submitted must be in English and in hard copy and soft copy.

Exporting Country: _____

A. GENERAL INFORMATION

1. Name of establishment : _____

2. Establishment No. : _____

3. Address : City/Village: _____

District : _____

Province/State/Prefecture: _____

GPS coordinate: _____

Phone : _____

Facsimile : _____

E-mail : _____

4. Address of headquarters (if different from establishments address):

: City/Village: _____

District : _____

Province/State/Prefecture: _____

GPS coordinate: _____

Phone : _____

Facsimile : _____

E-mail : _____

5. Contact person at establishment :

Name : _____

Position : _____

Telephone : _____

Facsimile : _____

E-mail : _____

6. Date when establishment produced pet food products:
_____ (dd/mm/yy)

7. Date when the last renovation of establishment was done:
_____ (dd/mm/yy)

8. Type of pet food products that are produced in the establishment or company:

9. Type of pet food products are going to be exported:

10. Additional facilities found at establishment:

10.1 Production of pet food products:

Yes No

10.2 Storage room for pet food products:

Yes No

11. Raw material used in establishment:

a. State raw material used for processing

Ingridients	Composition in products	Origin i.e. Animal (fish, poultry, bovine, ovine etc), plant, chemical	Country of Origin*

**Please attach copy of Certificate of Origin and Certificate of Health in the case of import.*

- b. List suppliers from which the raw material is obtained for processing.

12. The products intended for: Export
 Domestic
 Both

13. List the latest 3 years production of pet food products **Annex 1.**

14. In case of part or all of the products are intended for export

14.1. List the names of importing countries and date of approval, types of exported products, volume and the first year of export and name of importing country: **Annex 2.**

14.2. Date of the last 6 (six) months export and name of importing country: Please attach a copy of veterinary health certificate that accompanied the last shipment to each country): **Annex 3.**

15. Layout of Plant

Please Attach layout of plant showing properly labeled rooms for different operations, including the important equipment/facilities and to indicate the flow of the product and workers by colored arrows: **Annex 4.**

B. Additional Information of Establishment

1. Staff information

1.1 Total number of workers in establishment:

1.2 Number of workers for:

1.2.1 Processing room:

- 1.2.2 Packing:
- 1.2.3 Storage:
- 1.3 Does the establishment or company employ the veterinarian?
 - Yes No
 - If yes, number of employed veterinarians.
- 1.4 Number of accredited or approved private veterinarians/ auxiliaries stationed in establishment (if any):
- 1.5 What kind of trainings have been held by the company for staff related to food safety and quality assurance in the last 3 years?

- 2. Working hours information:
 - 2.1 Number of working hours per day:
 - 2.2 Number of working days per week:

- 3. Medical Examination and History:
 - 3.1 Is medical examination being a compulsory requirement for recruiting new employees in company?
 - Yes No
 - 3.2 Does the company have annual medical checkup policy for the worker?
 - Yes No
 - 3.3 Does medical records of each worker available?
 - Yes No
 - 3.4 Is the medical examination done by external or internal doctor?
 - Yes No

C. Location and Facilities of Establishment

- 1. Location
 - 1.1 Establishment is located at industrial/agricultural/residential area:
 - Industrial
 - Agricultural
 - Residential area
 - 1.2 Access to roads and a rail serving plant (paved or rendered dustproof).
 - Private road
 - Access to highway road
 - Access to non-highway road
 - Large road
 - 1.3 Please attach satellite picture of surrounding area of the establishment and indicate the building or facilities related to the production of pet food products: **Annex 5**

- 2. Facilities of establishment
 - 2.1 Source of Water
 - 2.1.1 Source of water used in the production of pet food products:
 - 2.1.2 Is the water source examined regularly by the external accredited laboratories?
 - 2.1.3 What kind of laboratory examinations subjected to the water?
 - 2.1.4 Please attach the latest of laboratory examination result: Annex 6**
 - 2.2 Source of Electricity

- 2.2.1 Describe the main source of electricity:
- 2.2.2 Describe the backup source of electricity:
- 2.3 Storage Facilities
- 2.3.1 For dry ingredients:
 Yes No
 If yes, the temperature _____°C and the relative humidity _____%
- 2.3.2 For chemicals, disinfectants and other cleaning agents:
 Yes No
 Please attach list of chemicals, disinfectants and other cleaning agents used. **Annex 7**
- 2.3.3 Chillers/refrigerators:
 Yes No
 If yes, the temperature _____°C and the relative humidity _____%, Capacity: _____ ton
- 2.3.4 Cold storage:
 Yes No
 If yes, the temperature _____°C and the relative humidity _____%, Capacity: _____ ton
- 2.4 Waste treatment/disposal.
- 2.4.1 Describe the treatment of liquid waste including disposal (method, frequency, capacity)
- 2.4.2 Describe the treatment of solid waste including disposal (method, frequency, capacity)
- 2.4.3 If the disposal of waste using the third party, please attach the latest letter of contract. **Annex 8**
- 2.5 Location of mouse/mice trap
 Attach copy of layout map of mouse/mice trap: **Annex 9**
- 2.6 Facilities for workers, attach information related to the quantity/room size/photo of: **Annex 10**
- Staff canteen(s)
 - Toilets
 - Lockers
 - Changing rooms
 - Shower facilities
 - Hands-free operated features for taps and toilet flush
 - Disposable towels and hand disinfectants

D. Procces of Production

1. Give detail flowchart on production/processing of pet food (from acceptance of raw material until finish products, including the application of temperature, time, air pressure, relative humidity and mesh size (if any) **Annex 11**
2. Indicate the control process (CP) and Critical Control Point (CCP) and or Operational Prerequisite Program (OPrP) in the flowchart and give them in detail in table **Annex 12**

E. Food Safety and Quality Assurance

1. The assurance system of food safety and quality applied in the establishment (choose one or more of the following answer):
 - 1.1 Good Manufacturing Practice/ Good Hygiene Practices:
 Yes No
If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions.
Annex 13
 - 1.2 Hazard Analysis Critical Control Point:
 Yes No
If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions.
Annex 14
 - 1.3 ISO 22000: 2018 Food Safety Management System
 Yes No
If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions.
Annex 15
 - 1.4 Food Safety System Certification (FSSC) 22000
 Yes No
If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions.
Annex 16
 - 1.5 Others: please attach the valid certificate and the latest report of internal audit including the fulfillment of corrective actions.
Annex 17

2. Is there any food safety team in the establishment?
 Yes No
If yes, please attach the name of members and education or training background (certified or not certified). **Annex 18**

3. Describe the criteria of pet food products which are rejected for consumption and how will the rejected pet food products be handled:
Annex 19

4. State whether laboratory testing is done in the establishment or provided by an external accredited laboratory:
 In-house laboratory
Please describe the type of examination, and please attach the latest laboratory report for each product that will be exported. **Annex 20**
 External accredited laboratory
Please attach the latest laboratory report for each product that will be exported. **Annex 21**

5. State whether the calibration of measuring tools is done in the establishment or provided by an external accredited institution.
- In-house
Please describe the type of measuring tools which are calibrated
Is the person who carries out the calibration certified?
 Yes No
Please attach the certificate. **Annex 22**
 - External accredited institution
Please describe the type of measuring tools which are calibrated.
Annex 23
6. Product recall and traceability system:
Please describe in detail product recall and the traceability system from raw material to finished products. **Annex 24**
7. Pest Control Program
- 7.1 Is the pest control program carried out by the management?
 Yes No
If yes, please describe the pest control program. **Annex 25**
- 7.2 If the pest control program carried out by the third party,
Please attach the letter of contract and the latest report of visit.
Annex 26
8. Cleaning and disinfection
- 8.1 How is cleaning and disinfection performed on floors and walls?
- 8.2 How is cleaning and disinfection performed on equipment which are contact with products?
- 8.3 How is cleaning and disinfection on equipment in contact with the rejected products?
9. Establishment monitoring program
- 9.1 Is there any regular control or supervision from government inspector or QC for the implementation of food safety program in the establishment?
 Yes No
- 9.2 Number of scheduled monitoring inspection per year: _____
(By Government inspectors or QC of the company)
10. Halal Assurance
- 10.1 Does the establishment apply the halal assurance system?
 Yes No
- 10.2 If yes, please mention the certification body that issues the halal certificate. Please attach the certificate. **Annex 27**

F. Declaration by Establishment:

I declare that information given above is true and correct.

Name, Signature* and Company Stamp

Date

**) Name of designated veterinarian who submitted the above information.*

G. Verification by Veterinary Authority:

I have verified the above information given by the company and certified that they are true and correct

Name, Signature* and Official Stamp
Of Veterinary Authority

Date

**) Name of designated veterinarian who submitted the above information.*