



APPLICATION FORM FOR REGISTRATION OF LOW RISK FOOD

New/renewal application:

(Fill in product registration number if renew).....

1.0 Particulars of food:

1.1 Brand Name:

1.2 Common name.....

1.3 Brief description of the physical characteristics of the food (form (eg. solid, liquid etc. colour etc.).....

1.4 Intended end user

1.5 Type of packaging container (eg. bottle, box, sachet etc)

1.6 Type of materials for the packaging container and liner if any

1.7 Type of materials for closure and seal

1.8 Retail packaging unit(s) in weight or volume or number

1.9 Shelf life (month).....

1.10 Shelf life after opening of container.....

1.11 Instructions for use

1.12 Recommended storage conditions before opening the container

1.13 Recommended storage conditions after opening the container

2.0 Particulars of applicant

- 2.1 Name (company/person).....
- 2.2 Name of the country where the company was incorporated (Provide registration certificate).....
- 2.3 Physical address (plot/block No./street/Village/district/region.....
.....
.....
- 2.4 Postal Address.....
.....
- 2.4 Country of origin (food to be imported).....
- 2.5 Telephone.....
- 2.6 Mobile number.....
- 2.7 E- Mail.....

3.0 Particular of a local agent (for imported food products)

- 3.1 Name (company/person).....
- 3.2 Physical address (plot/block No./street/Village/district/region.....
.....
.....
- 3.3 Postal Address.....
.....
- 3.4 Telephone.....
- 3.5 Mobile number.....
- 3.6 E- Mail.....

4.0 Particulars of manufacturer

- 4.1 Name (company/person).....
Name of the country where the company was incorporated (provide registration certificate)
- 4.2 Postal Address.....
- 4.3 Physical address (country, town/city, street

- 4.4 Phone.....
- 4.5 Mobile number
- 4.6 E-Mail.....

5.0 Ingredients used

List ingredients in descending order of proportion

5.1 Main ingredients

S/N	Name

5.2 Food additives

S/N	Name (Specific, common, chemical, technical) or E-number

6.0 Certification by the applicant

I,
 The(position in the company) and a
 duly authorised representative of
 do hereby certify that all the information filled in this form and all the
 accompanying documents are true and correct to the best of my knowledge and
 confirm that the information referred to in this application is available for proof.

Signature.....

Date.....

Official Stamp/Seal.....