DEPARTMENT OF VETERINARY SERVICES MALAYSIA
Ministry of Agriculture and Food Security Malaysia
Wisma Tani, Podium Block 1B,
Lot 4G1, Precint 4
Federal Government Administration Centre
62630 PUTRAJAYA, MALAYSIA
Tel:603-88702000 ; Fax: 603-88885755

APPLICATION FORM FOR EXPORT
MEAT, POULTRY, MILK, EGG AND PRODUCTS INTO MALAYSIA

Important consideration before completing this form:

- Applicants shall read and understand the **General Procedure to Import Meat, Poultry, Milk, Egg and Products into Malaysia.**
- Please complete the application form in **English, typed format and no fields are left blank.**
- Submission of the complete application together with an **Official Request Letter** from the **Competent Veterinary or Regulatory Authority of the Exporting Country.**
- The completed DVS application form with all supporting documents listed in the checklist must be submitted in **physical and electronic format (Appendix 1: Guideline for Submission Application).**
- Submitting multiple applications will delay the process, as resubmissions are treated as new applications.
- Halal Application must be through **JAKIM International Abattoir Application System (JIAAS) at myehalal.halal.gov.my/jiaas/v1/.**

(A) Particulars of Establishment *(Please attach Factory Profile)*

(1) Name of Establishment: _____

(2) Address: _____

_____

Contact Person: _____

Contact Number: _____

Email Address: _____

Fax Number: _____

(3) If Premise is on lease, please provide a copy of the leasing agreement.

(4) i) Company/ Plant Registration Number:_____
(Please attach Company Profile)

ii) Certificate of Food Safety Management System:_____
(Please attach Certificate of Food Safety Management System)

(5) Year Constructed: _____

(6) Total Land Area: _____

(7) Total Built-in Area: _____

(8) List of Product Category of Products Manufactured:
(e.g.: Carcass, Cutting, UHT Milk, Powder Milk, Cheese, Powder Eggs, Gelatine, etc.)
(Please attach list of product categories for the products manufactured)

_____

(9) List of products details based on product category intended for export to Malaysia:
(Please attach Profile for each product(s) intended to export (Product Description))

_____

(10) List of countries and products exported besides Malaysia:
(Please attach list of countries with products exported)

_____

(11) Source of Raw Material (Livestock/Poultry/Meat/Milk/Eggs/Gelatine etc.):

_____

(*Please attach List of Raw Materials and Suppliers of these Raw Materials)*

- *If **imported** please submit Sanitary/Health/Origin Certificates issued by the exporting country's competent authority and if the imported product is of Halal status, please attach Halal Certificates from the Approved Authority.*
- *If raw material from **local source** attached accreditation certificate from competent authority for the farm freedom of diseases, practicing Good Husbandry Practice, Antibiotic and chemical residue monitoring program dan result.)*

Provides districts from which the raw materials/livestock/poultry are obtained for slaughter/processing (If locally obtained):

_____

_____

Whether company's farms, contracts farms or imported:

_____

(12) Establishment Approved for Export to:

_____

(List the names of countries, dates of approval, types of products approved, year of first export, dates of most recent export. Attach copy of veterinary health certificate that accompanied the last shipment to each country)

(13) State whether Establishment is a Service Abattoir or Used Exclusively by Company (For abattoir only):

_____

(14) State whether you have a Quality Assurance Program: **Yes/No**

If **Yes**, please attach Company Food Safety Objective and Policy, include SOP as below:

a) **Premise**: Exterior Building, Interior Building (Design, Construction and Maintenance; Lighting, Ventilation, Waste Disposal, Inedible Areas);

b) **Sanitary Facilities**: Employee Facilities, Equipment Cleaning & Sanitizing Facilities;

c) **Water Supply**: Steam, Ice Quality & Supply;

d) **Transportation**: Food Carriers, Temperature Control;

e) **Storage**: Incoming Material Storage, Non-Food Chemical Receiving & Storage, Finished Product Storage;

f) **Equipment**: Design & Installation, Maintenance & Calibration;

g) **Personnel**: Training (Food Handling & HACCP), Hygiene & Health Requirements;

h) **Sanitation Program**: Sanitation Standard Operating Procedure (SSOP);

i) **Pest Control**: Pest Control Program, Pest control layout plan, chemical usage & record;

j) **Recall Program**: Product Recall Program, Mock Recall.

(B) Location and Layout of Establishment

(1) Description of the area where establishment is located:
(e.g. industrial, agricultural, residential and neighbouring factories etc.)

_____

(2) Layout plan of establishment including:

i. Location plan to be attached with application showing the nearest town;
ii. Floor plan showing Machinery Layout and Facilities;
iii. Floor plan showing flow process from raw materials to finished products with different colour arrows (indicate clean and dirty area);
iv. Floor plan showing workers entrance, movement into plant and processed areas and exiting by arrows (indicate in different colour for entry and exit);
v. Separate rooms for different operations.

(3) Materials Used & Design Floor: _____

Walls:_____

Ceilings & Superstructures:_____

Lighting: _____

Ventilation System: _____

Footbaths for entrance into slaughter/processing rooms/areas:

_____

(C) Water Supply / Ice

(1) Source of water: _____

(2) Chlorination: (**Yes/No**) _____
*(If **Yes**, state level in ppm):*

(3) Bacteriological examination:
(Please attach water sampling record)

i. Method:_____

ii. Frequency:_____

(4) Ice making machine available in premises: Yes/No _____

If yes, capacity of machine: _____

Ice storage and capacity: _____

(D) Manpower

(Please attach Organization Chart showing Designation, HACCP Team Leader and members)

(1) Staff Information
(*Please attach the number of workers based on qualifications of professional, technical, general workers, etc. employed by establishment)*

_____

(2) Medical Examination and History

i. Are employees medically examined and certified fit to work in a food preparation establishment, prior to employment?: Yes/No____

ii. Annual Health Check and Records for Workers: Yes/No____

iii. Medical records of employee available?: Yes/No____

(3) Uniforms/Attire

i. Uniforms: Yes/No _____

ii. Boots: Yes/No _____

iii. Gloves and face masks: Yes/No _____

iv. Laundry *(in-plant or by contract)*: _____

Notes:

- **If establishment is an abattoir (meat & poultry), please proceed to Section E.**
- **If establishment is a processing plant (dairy products, egg products, gelatine and gelatine capsule), please proceed to Section F.**

(E) Slaughtering Premises

(1) Equipment
(Please attach list of equipment used (types, brand and manufacturer))

_____

(2) Slaughtering Procedures
(Please attach process flowcharts)

_____

Livestock/poultry slaughtered: _____

Brief description: _____

_____

Line speed _____

(3) Food Safety Program

i. Whether based on HACCP concepts or equivalent: (**Yes/No**)_____
*(If **Yes**, please attach the HACCP Analysis Worksheet together with HACCP Plan Summary and name of the authority that certified it.)*

ii. State whether testing done in-house or provided by a service laboratory:

_____

iii. If in-house, list facilities and tests:_____
(Please attach a copy of sampling manual)

iv. Sampling and testing procedures: _____
(Please attach a copy of latest sampling record)

_____

v. Criteria for rejection/ acceptance of carcasses/organs: _____

_____

(4) Sanitation Standards Operating Procedures (SSOP)
(Please attach copies of SSOP)

i. Brief description on SSOP:

_____

_____

ii. Please attach copies of the latest daily records (current month of the year) of cleaning and sanitizing treatment of facilities and equipment.

_____

(5) Daily Throughout

i. Number of shifts:_____

ii. Slaughter capacity (metric tonnes) per shift:

_____

_____

iii. Number of working days per week: _____

(6) Capacity

Total annual slaughter capacity (metric tonnes):

_____

_____

(7) Meat Inspection

i. By Government Inspectors or Company's QC Staff:_____

ii. Total number of inspectors, grade, qualification and training:

_____

iii. Number of inspectors per shift:_____

iv. Inspection procedures:_____
(Please attach a copy of the Inspection Manual)

v. Criteria of judgement for condemnation:_____
(Please attach a copy of the latest condemnation record (current month of the year))

(8) Boning/Cutting Room

Temperature control features: (Yes/No) _____

If yes, state temperature: _____

Capacity: _____

(9) Storage Facilities

i. State whether storage for final products is in-house or sent to service provider:

_____

ii. For packing/ canning materials: _____

iii. For dry ingredients_____

iv. For chemicals, disinfectants and other cleaning agents _____
(Please attach copies of the latest records (current month of the year)).

(10) Chillers/ Freezers

Numbers, type (static, air blast, etc. ammonia or freon) and capacity:
(Please attach list of chiller & freezer with capacity)

_____

(11) Offal Handling & Cooling Procedures

_____

(12) Waste Treatment/ Disposal

i. System of delivery of inedible/ condemned products for treatment:

_____

ii. System of waste treatment/ disposal:

_____

iii. System of effluent treatment/ disposal:

_____

iv. Designated disposal centre:

_____

v. Daily frequent of disposal for waste and effluent:

_____

(F) Processing/ Canning Premises

(1) Equipment
(Please attach list of equipment (types, brand and manufacturer) used)

_____

(2) Processing Procedures
(Please attach process flowcharts of each product)

i. Brief description of type of products and processing/ canning methods: (including time and temperature of processing/canning)
(Please attach type of product and method of processing)

_____

_____

(3) Food Safety Program

i. Whether based on HACCP concepts or equivalent: (**Yes/No**)_____
*(If **Yes**, please attach the HACCP Analysis Worksheet together with HACCP Plan Summary and name of the authority that certified it.)*

ii. State whether testing done in-house or provided by a service laboratory:

_____

iii. If in-house, list facilities and tests: _____
(Please attach a copy of testing manual)

iv. Sampling and testing procedures: _____
(Please attach a copy of latest sampling record)

_____

v. Criteria for rejection/ acceptance of products/ raw materials:

_____

(4) Sanitation Standards Operating Procedures (SSOP)
(Please attach copies of SSOP)

i. Brief description on SSOP:

_____

_____

ii. Please attach copies of the latest daily records (current month of the year) of cleaning and sanitizing treatment of facilities and equipment.

_____

(5) Daily Throughout

i. Number of shifts: _____

ii. Production (metric tonnes) per shift: _____

iii. Number of working days per week: _____

(6) Capacity

Total annual production (metric tonnes) of each product category:_____
(Please attach list of the annual production for each product category)

(7) Storage Facilities

i. Please select (√) storage for final product :

☐ In-house storage – est. num. (*if applicable*) :_____

☐ Centralize storage – est. num. (*if applicable*) :_____

☐ Service provider storage – est. num. (*if applicable*) :_____

ii. For packing/ canning materials: _____

iii. For dry ingredients: _____

iv. For chemicals, disinfectants and other cleaning agents: _____
(Please attach copies of the latest records (current month of the year))

(8) Chillers/ Freezers

Numbers, type (static, air blast, etc./ammonia or freon) and capacity:
(Please attach list of chiller & freezer with capacity)

_____

(9) Waste Treatment/ Disposal

i. System of delivery of inedible/ condemned products for treatment:
_____

ii. System of waste treatment/ disposal:
_____

iii. System of effluent treatment/ disposal:
_____

iv. Designated disposal centre:
_____

v. Daily frequent of disposal for waste and effluent:
_____

(G) Welfare/ Washing Facilities

i. Staff canteen (s): _____

ii. Toilets: _____

iii. Lockers: _____

iv. Changing rooms: _____

v. Shower facilities: _____

vi. Hands-free operated features for taps and toilet flush: _____

vii. Disposal towels and hand disinfectant: _____

(H) Relevant information on the establishment

(Please submit together with this application)

(1) Corporate brochures / annual reports of establishment.

(2) Photographs of processing flow of products/ facilities.
(Labelled photographs of processing facilities showing the various stages of production, starting from receipt of raw materials to packaging and storage of finished products, in operation)

(I) Declaration by Establishment

I declare that the information given above are true and correct. The company undertakes to comply with all requirements of the approval authority of the importing country.

_____
Signature

_____
Name and Designation

Company Name and Stamp

_____
Date

Witness to Signatory

_____
Signature

_____
Name and Designation

Company Name and Stamp

_____
Date

(J) To be filled by the Veterinary / Regulatory Authority of Exporting Country

I hereby confirm that this establishment complies with the Malaysian Import Requirements.

Comments:

_____

_____

Name:

_____

Designation of Veterinary / Regulatory Authority:

_____

_____ _____

Signature and Official Stamp Date

(K) For Official Use Only (DVS Malaysia)

Comments:

_____

_____

Name: _____

Designation of DVS Officer:

_____

_____ _____

Signature and Official Stamp Date

CHECK LIST FOR APPLICATION:

You are kindly requested to check (√) your application against this list before submission to DVS.
If your information is inadequate / incomplete, it may result in delays in processing your application.

Name of Establishment: _____

Establishment Number: _____

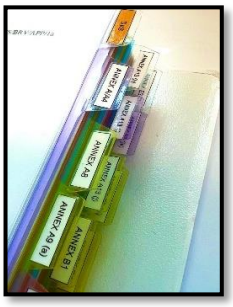
INFORMATION REQUIRED BY DVS FOR EXPORT OF MEAT, POULTRY, MILK, EGG AND PRODUCTS INTO MALAYSIA	ANNEX	CHECKED BY APPLICANT (√)	CHECKED BY DVS OFFICER
Official Request Letter from the Competent Veterinary or Regulatory Authority of the Exporting Country.	**Available**		
I - DVS FORM			
(A) Particulars of Establishment	**Annex A**		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14).			
Company Profile.	**Annex A4(i)**		
Copy of Certificate of Food Safety Management System.	**Annex A4(ii)**		
List of products category of products manufactured.	**Annex A8**		
List of product details and profile for each product(s) intended to export (Product Description): i. Material used ii. Sensitive material identified iii. Potential material known to cause hypersensitivity (allergy) identified iv. Reworked material v. Important product characteristic vi. Process type vii. Packaging and labelling viii. Shelf-life and storage conditions ix. Handling and distribution x. Intended consumer	**Annex A9**		
List of countries and products exported.	**Annex A10**		
Source of raw materials: i. List of raw material and suppliers of the raw materials; ii. Copy of Sanitary/Health/Origin Certificates issued by the exporting country's competent authority; iii. Copy of Halal Certificates from the approved authority; iv. Copy of accreditation certificates from competent authority.	**Annex A11**		
Approved export establishment i. List of countries, dates of approval, types of products approved, year of first export & dates of recent export; ii. Copy of Veterinary Health Certificates, which accompanied latest shipment to each importing country.	**Annex A12**		

INFORMATION REQUIRED BY DVS FOR EXPORT OF MEAT, POULTRY, MILK, EGG AND PRODUCTS INTO MALAYSIA	ANNEX	CHECKED BY APPLICANT (√)	CHECKED BY DVS OFFICER
Quality Assurance Program: i. Company Food Safety Objective and Policy; ii. SOP on related QAP.	**Annex A14**		
(B) Location and Layout of Establishment			
(1) (2) (3).			
Copy of location plan showing clearly the surroundings where the establishment is located.	**Annex B2(i)**		
Layout plans of machinery and facilities.	**Annex B2 (ii)**		
Layout plans showing flow process by arrows from raw materials to finished products with different coloured arrows (indicate clean and dirty area).	**Annex B2 (iii)**		
Layout plans showing workers entrance, movement into plant and processed areas and exiting by arrows (indicate in different colour for entry and exit).	**Annex B2 (iv)**		
Layout plans which indicate separate rooms for different operations.	**Annex B2 (v)**		
(C) Water Supply/Ice			
(1) (2) (3) (4).			
Copy of water sampling record.	**Annex C3**		
(D) Manpower			
(1) (2) (3).			
Copy of Organization Chart.	**Annex D**		
List the number of workers based on qualifications of professional, technical, general worker.	**Annex D1**		
(E) Slaughtering Premises (If applicable)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12).			
List of equipment used (types, brand and manufacturer).	**Annex E1**		
Process flowcharts for slaughtering and each product.	**Annex E2**		
Copy of HACCP Analysis Worksheet together with HACCP Plan Summary and name of the authority that certified it.	**Annex E3 (i)**		
Copy of sampling manual, list of facilities and tests of samples, if done in-house.	**Annex E3 (iii)**		
Copy of latest sampling record and report.	**Annex E3 (iv)**		
Copy of SSOP Program.	**Annex E4**		
Copy of the latest daily records (current month of the year) for cleaning and sanitizing treatment of facilities and equipment.	**Annex E4(ii)**		
Copy of meat inspection manual.	**Annex E7 (iv)**		

INFORMATION REQUIRED BY DVS FOR EXPORT OF MEAT, POULTRY, MILK, EGG AND PRODUCTS INTO MALAYSIA	ANNEX	CHECKED BY APPLICANT (√)	CHECKED BY DVS OFFICER
Copy of the latest condemnation record (current month of the year).	**Annex E7 (v)**		
Copies of the latest records for storage of chemicals, disinfectant and other cleaning agents (current month of the year).	**Annex E9**		
List of chiller/ freezer with capacity.	**Annex E10**		
(F) Processing/Canning Premises (If applicable)			
(1) (2) (3) (4) (5) (6) (7) (8) (9).			
List of equipment used (types, brand and manufacturer).	**Annex F1**		
Process flowcharts of each product.	**Annex F2**		
Type of product and method of processing.	**Annex F2(i)**		
Copy of HACCP Analysis Worksheet and HACCP Plan.	**Annex F3(i)**		
Copy of sampling manual, list of facilities and tests of samples, if done in-house.	**Annex F3(iii)**		
Copy of latest sampling record and report.	**Annex F3(iv)**		
Copy of SSOP Program.	**Annex F4**		
Copy of the latest daily records of cleaning and sanitising treatment of facilities and equipment (current month of the year).	**Annex F4(ii)**		
List of annual production for each product.	**Annex F6**		
Copies of the latest records for storage of chemicals, disinfectant and other cleaning agents (current month of the year).	**Annex F7**		
List of chiller/ freezer with capacity.	**Annex F8**		
(G) Welfare/Washing Facilities			
(H) Relevant information on the establishment			
(1) (2).			
Corporate Brochure/Annual Report of Establishment.	**Annex H1**		
Photographs of processing flow of products/ facilities.	**Annex H2**		
(I) Declaration by Establishment			
(J) Verification by Veterinary Authority			
II - JAKIM APPLICATION SLIP	**Available**		

APPENDIX 1

GUIDELINE FOR SUBMISSION APPLICATION

	THINGS TO BE PREPARED	ACTION TO BE TAKEN
1.	Cover letter from Authority	Official Request Letter from the Competent Veterinary or Regulatory Authority of the Exporting Country.
2.	Application Form	Ring file type: 2D Colour: White Size: A4
3.	Supporting Document 	Each annex separated with file separator and labelled according to the checklist.
4.	USB Drive	USB drive marked with name and number of the establishment.

- Points 1, 2, and 3 should be sent via email to the Secretariat through the Competent Authority of the Exporting Country or the Embassy.
- Points 1, 2, 3, and 4 must be submitted in physical form to the Secretariat within one month from the date of the email submission.

SECRETARIAT ADDRESS FOR SUBMITTING APPLICATION FORM

PRODUCTS	COUNTRY STATUS	SECRETARIAT ADDRESS
Milk and Milk Products	FMD Free Country (with or without vaccination)	Import Export Services Section Disease Control and Veterinary Biosecurity Division Department of Veterinary Services Ministry of Agriculture and Food Security Malaysia Wisma Tani, Podium Block 1B, Lot 4G1, Precinct 4, Federal Government Administration Centre 62630 PUTRAJAYA, MALAYSIA Tel: 603-88702000 ; Fax: 603-88886472 Email address: skie@dvs.gov.my
	FMD Affected Country	Veterinary Inspection and Certification Section Veterinary Regulatory Division Department of Veterinary Services Ministry of Agriculture and Food Security Malaysia Wisma Tani, Podium Block 1B, Lot 4G1, Precinct 4, Federal Government Administration Centre 62630 PUTRAJAYA, MALAYSIA Tel: 603-88702000 ; Fax: 603-88885755 Email address: upvln@dvs.gov.my
Egg and Egg Products	Import Requirements Available	Import Export Services Section Disease Control and Veterinary Biosecurity Division Department of Veterinary Services Ministry of Agriculture and Food Security Malaysia Wisma Tani, Podium Block 1B, Lot 4G1, Precinct 4, Federal Government Administration Centre 62630 PUTRAJAYA, MALAYSIA Tel: 603-88702000 ; Fax: 603-88886472 Email address: skie@dvs.gov.my
Meat, Poultry and Gelatine	Import Requirements Available	Veterinary Inspection and Certification Section Veterinary Regulatory Division Department of Veterinary Services Ministry of Agriculture and Food Security Malaysia Wisma Tani, Podium Block 1B, Lot 4G1, Precinct 4, Federal Government Administration Centre 62630 PUTRAJAYA, MALAYSIA Tel: 603-88702000 ; Fax: 603-88885755 Email address: upvln@dvs.gov.my