DISCLAIMER:

The Original document is written in Bahasa Indonesia, and subsequently translated into English. In the event of a discrepancy between the two versions, Bahasa Indonesia version shall take precedence.

REGULATIONS OF THE HALAL PRODUCT ASSURANCE ORGANIZING AGENCY (BPJPH)

NUMBER 3 OF 2023
ON

GUIDELINES FOR ACCREDITATION AND/OR ASSESSMENT OF CONFORMITY OF FOREIGN HALAL CERTIFICATION BODY

BY THE BLESSINGS OF ALMIGHTY GOD

THE HEAD OF THE HALAL PRODUCT ASSURANCE ORGANIZING

AGENCY

Considering: a. that international cooperation on halal product assurances is necessary to improve and develop the implementation of halal product assurances;

b. that foreign halal products whose halal certificates are issued by a foreign halal certification body can enter, circulate, and be traded in Indonesian territory if the foreign halal certification agency and the Halal Product Assurance Organizing Body have collaborated on mutual recognition and/or mutual acceptance of halal certificates;

c. that foreign halal certification body that will collaborate on mutual recognition and/or mutual acceptance of halal certificates must be accredited as halal certification institutions based on ISO/IEC 17065;

d. that if there are no accreditation institutions in the overseas country, a foreign halal certification agency in that domestic country can be accredited by the accreditation team of Indonesian Halal Inspection Body (LPH);

e. that based on the considerations in letters a, b, c, and d, it is necessary to establish a Halal Product Assurance Organizing Agency Regulation concerning Guidelines for Accreditation and/or Conformity Assessment of Foreign Halal Certification Body;

Observing : 1. Law Number 33 of 2014 on Halal Product Assurance (State Gazette of the Republic of Indonesia of 2014 Number 295, Additional State Gazette of the Republic of Indonesia Number 5604).;

2. Law Number 6 of 2023 on the Stipulation of Government Regulations in Lieu of Law Number 2 of 2022 on Job Creation into Law (State Gazette of the Republic of Indonesia of 2023 Number 41);

3. Government Regulation Number 39 of 2021 on the Implementation of Halal Product Assurance (State Gazette of the Republic of Indonesia of 2021 Number 49, Additional State Gazette of the Republic of Indonesia Number 6651));

4. Presidential Regulation Number 12 of 2023 on the Ministry of Religion (State Gazette of the Republic of Indonesia number 21);

5. Ministerial Regulation of Religious Affairs Number 12 of 2021 on the Accreditation Team for Halal Inspection Body (State Gazette of the Republic of Indonesia of 2021 Number 763);
6. Ministerial Regulation of Religious Affairs Number 2 of 2022 concerning International Cooperation on Halal Product Assurance (State Gazette of the Republic of Indonesia of 2022 Number 6);
7. Ministerial Regulation of Religious Affairs Number 72 of 2022 on the Institution and Work Procedures of the Ministry of Religious Affairs of the Republic of Indonesia (State Gazette of the Republic of Indonesia of 2022 Number 955);

HAS DECIDED:

To enact : REGULATIONS OF THE HALAL PRODUCT ASSURANCE ORGANIZING AGENCY ON ACCREDITATION AND/OR ASSESSMENT GUIDELINES FOR FOREIGN HALAL CERTIFICATION BODY.

Article 1

(1) Foreign Halal Certification Body (FHCBs) can be established by:
   a. Government; or
   b. The local state Islamic religious institutions.
(2) FHCBs as intended in paragraph (1) must be independent, competent, and free from conflicts of interest.
(3) Mutual recognition and acceptance of FHCBs is determined through accreditation and/or conformity assessment of the FHCBs through assessment, inspection, and signing of Mutual Recognition Agreements (MRAs).

Article 2

To carry out the accreditation and/or conformity assessment of foreign halal certification body (FHCB) as intended in Article 1(3), Accreditation Guidelines are established. The Conformity Assessment Guidelines for Foreign Halal Certification Body (FHCBs) are attached to this Agency Regulation and are an integral part of it.

Article 3

This Agency Regulation shall come into force on the date of its enactment.

Issued in Jakarta
On October 27, 2023
HEAD OF HALAL PRODUCT
ASSURANCE ORGANIZING AGENCY,

[signed]

MUHAMMAD AQIL IRHAM

ANNEX OF THE REGULATION OF HALAL PRODUCT
ASSURANCE ORGANIZING AGENCY OF 2023
CONCERNING
GUIDELINES FOR ACCREDITATION AND/OR ASSESSMENT
OF CONFORMITY OF FOREIGN HALAL CERTIFICATION BODY

GUIDELINES FOR ACCREDITATION AND/OR ASSESSMENT OF CONFORMITY OF FOREIGN HALAL CERTIFICATION BODY

CHAPTER I
INTRODUCTION

A. BACKGROUND

International cooperation on halal product assurances is essential to improve and develop the implementation of halal product assurances, promote the mutual recognition and acceptance of halal certificates, and prevent technical barriers to trade between countries. This cooperation can help to smooth the flow of international import-export trade.

Mutual recognition and acceptance of halal certificates is a formal process of assessing the conformity, competence, and appropriateness of foreign halal certification bodies (FHCBs), both government-owned and Islamic religious institution-owned, to issue halal certificates that are mutually recognized and accepted by Indonesia and partner countries.

To determine mutual recognition and acceptance of halal certificates, the conformity of foreign halal certification bodies (FHCBs) is assessed through accreditation, inspection, and signing of Mutual Recognition Agreements (MRAs) with both government-owned FHCBs and FHCBs belonging to local state Islamic religious institutions.

Accreditation certificates for FHCBs, acquired from the local state accreditation bodies, are issued by the accreditation body that:

a. has collaborated to develop schemes for mutual recognition and mutual acceptance of conformity assessment results and has obtained recognition in regional or international accreditation cooperation organizations; and.
b. has carried out a conformity assessment in the form of a halal standard assessment that is in accordance with halal product assurance standards in Indonesia through compliance with technical and sharia aspects.

If there is no accreditation agency in an FHCB's country, the FHCB can be accredited by the Halal Inspection Institute (LPH) accreditation team. The LPH accreditation team forms an FHCB Assessment Team to carry out accreditation assessments and FHCB conformity assessments. The FHCB Assessment Team is appointed by the Head of the Halal Product Assurance Organizing Agency (BPJPH).

To carry out accreditation and/or conformity assessment of FHCBs, the FHCB Assessment Team requires guidelines that serve as standards. These guidelines consist of the following:

1. Legal Basis;
2. FHCBs Accreditation Requirements Documents and/or FHCBs Conformity Assessment Documents;
3. Scope of Competency of Foreign Halal Certification Bodies;
4. Foreign Halal Certification Agency Accreditation and/or Conformity Assessment Fees;
5. Application for Accreditation and/or Conformity Assessment of FHCBs;
6. Review of the Accreditation and/or Conformity Assessment Application for FHCBs;

7. Field Assessment Activities for Accreditation and/or Conformity Assessment of FHCBs;
8. Evaluation of Accreditation and/or Conformity Assessment Result for Foreign Halal Certification Bodies and Issuance of Certificate of Conformity Assessment Result;
9. Issuance of Recommendation Letter and Accreditation Certificate;
10. Formulation and Signing of International Agreement or Memorandum of Mutual Understanding (Mutual Recognition Agreement/MRA);
11. Surveillance;
12. Witness Assessment;
13. Changes in the Data of Foreign Halal Certification Bodies;
14. Reaccreditation and/or Extension of Mutual Accreditation Recognition and/or Conformity Assessment;
15. Addition to the Scope of Accreditation and/or Conformity Assessment;
16. Confidentiality
17. Rights and Obligation of Accredited and/or Conformity Assessed FHCBs;
18. Complaints;
19. Appeals;
20. Suspension and Revocation of the Scope of Accreditation Status and/or Conformity Assessment and Reduction of the Scope of Accreditation and/or Conformity Assessment;
21. Notification of Changes to Accreditation Requirements and/or Conformity Assessment;
22. Dispute Resolution; and
23. Remote Assessment

B. PURPOSE AND OBJECTIVES

1. This guideline is a reference for the process of accrediting and/or assessing the conformity of foreign halal certification bodies (FHCBs).
2. This guideline aims to provide direction and guidance for government-owned FHCBs and Islamic religious institution-owned FHCBs in submitting applications for accreditation and/or conformity assessment of FHCBs.

C. SCOPE

This guideline provides provisions for the implementation of FHCB accreditation and/or conformity assessment in a structured, systematic, accountable, comprehensive, and professional manner.

CHAPTER II
CONTENTS

A. LEGAL BASIS
1. The accreditation and/or conformity assessment of foreign halal certification bodies (FHCBs) must be carried out in accordance with the recognized provisions of relevant legislations or standards.
2. The recognized provisions of relevant legislations or standards include, but are not limited to:
   a. Law Number 33 of 2014 on Halal Product Assurances;
   b. Law Number 6 of 2023 on the Stipulation of Government Regulations in Lieu of Law Number 2 of 2022 on Job Creation into Law;
   c. Government Regulation Number 39 of 2021 on Implementation of Halal Product Assurance Sector;
   d. Ministerial Regulation of Religious Affairs Number 26 of 2019 on Implementation of Halal Product Assurances;
   e. Ministerial Regulation of Religious Affairs Number 12 of 2021 on LPH Accreditation Team;
   f. Ministerial Regulation of Religious Affairs Number 2 of 2022 on International Cooperation on Halal Product Assurances;
   g. Ministerial Decree of Religious Affairs Number 748 of 2021 on Types of Products that Must be Halal Certified;
   h. Ministerial Decree of Religious Affairs Number 1360 of 2021 on Types of Materials that are exempt from the Obligation to be Certified Halal;
   i. Decree of the Head of the Halal Product Assurance Organizing Agency Number 20 of 2023 on amendments to Decree of the Head of the Halal Product Assurance Organizing Agency Number 57 of 2021 on Criteria for the Halal Product Assurance System;
   j. Decree of the Head of the Halal Product Assurance Organizing Agency Number 77 of 2023 on Guidelines for Implementing a Halal Product Assurance System in the Slaughter of Ruminant Animals and Poultry;
   k. Decree of the Head of the Halal Product Assurance Organizing Agency Number 78 of 2023 on Guidelines for Halal Certification of Food and Beverages with Processing;
   l. SNI ISO/IEC 17065:2012 Requirements for Product, Process and Service Certification Institutions;
   m. SNI ISO/IEC 17025:2017 General Requirements for Laboratory Competency;
   n. SNI 99002:2016 Halal Slaughter of Poultry;
   o. SNI 99003:2018 Halal Slaughter of Ruminant Animals;
   p. SNI ISO/TS 20224 - 3 2020 Molecular Biomarker Analysis Detection of Animal Derived Materials in Food and Feed Materials using real-time PCR - Part 3 Pig DNA Detection Method;
   q. SNI 8965: 2021 Methods for Detection and Quantification of Ethanol in beverage products;
   r. SNI 99004:2021 on General Requirements for Halal Food;
   s. Other related Standards/Criteria/Guidelines in accordance with statutory provisions; and

t. Amendments to provisions in letters a to q.

B. FHCA ACCREDITATION REQUIREMENTS DOCUMENTS AND/OR FHCB CONFORMITY ASSESSMENT DOCUMENTS;

1. FHCA requirements:
   a. To possess proofs of legality on their agency's establishment which is evidenced by consent or recommendations from a local state authority; Among such proofs will be legally binding deed or letter of recommendation from authorized instances.
   b. To possess their own office and include the address according to the office location;
   c. To possess proofs of office ownership or rental with a minimum rental period equivalent to the validity period of the accreditation certificate (4 years);
   d. To possess an organizational structure;
   e. To possess a sharia council/fatwa council or ulama with the authority to determine the halalness of products, consisting of at least 3 (three) people;
   f. To possess competent halal auditors, as proven by training certificates and/or halal auditor competency certificates of at least 3 (three) people in accordance with halal auditor competency standards in Indonesia, and the said auditor shall be registered only in 1 (one) FHCB;
      Halal auditor training certificates can be accepted as fulfillment of the FHCA halal auditor competency requirements and halal auditors are required to have a halal auditor competency certificate no later than 1 year after the accreditation certificate and/or certificate of conformity assessment results are issued.
   g. To possess halal standards that are in accordance with JPH standards;
   h. To possess an accreditation certificate from a local state accreditation institution that has received recognition in regional or international organizations and has entered into international cooperation (IAF MLA, SMIIC, and/or IHAF) in conformity assessment for FHCBs which are applying for mutual recognition and acceptance;
   i. To possess an accredited laboratory or collaborate with an accredited laboratory with international standard ISO 17025 from an accreditation institution recognized by the International Laboratory Accreditation Cooperation Mutual Recognition Arrangement (ILAC MRA) for a scope that is in accordance with the scope of halal inspection competence; and
   j. To submit a request for cooperation to the Head of the Agency in Indonesian or English.
2. Requirements are uploaded via SIHALAL using Indonesian or English translated documents.

C. SCOPE OF COMPETENCY OF FOREIGN HALAL CERTIFICATION BODIES

1. The scope of competency for FHCB's accreditation and/or conformity assessment includes:
   a. Food;
   b. Drink;
   c. Drug;
   d. Cosmetics;
   e. Biological products
   f. Chemical products;
   g. Genetic engineering products;

h. Use goods;
i. Slaughtering services;
j. Processing services;
k. Packaging services;
l. Storage services;
m. Distribution services;
n. Sales services; and/or
o. Serving services.

2. The scope of competency as listed in item 1 must be in accordance with the resources owned by the FHCBs, including laboratories accredited to ISO 17025 and human resources in the position of halal auditor in accordance with the competency standards for halal auditors in Indonesia.
3. The approval of scope of competence for FHCB as mentioned in item 1 is granted by taking into account the number of halal auditors provided by the FHCB, and the details are as follows:
   a. for FHCB with 3 up to 6 halal auditors, the maximum number of competency scope will be 2;
   b. for FHCB with 7 up to 15 halal auditors, the maximum number of competency scope will be 5;
   c. for FHCB with 16 up to 30 halal auditors, the maximum number of competency scope will be 10; or
   d. for FHCB with more than 30 halal auditors, the maximum number of competency scope will be 15;
4. Human resources in the position of halal auditor must meet the following requirements:
   a. for the scope of competency of the food and beverage group and services related to food and beverages, the halal auditors must at least have a bachelor's degree in food, food technology, chemistry, biochemistry, biology, culinary arts, agriculture, agricultural technology, nutrition, animal husbandry, forestry, or fisheries;
   b. for the scope of competency of the drug group and drug-related services, the halal auditors must at least have a bachelor's degree in chemistry, biochemistry, pharmacy, or medicine;
   c. for the scope of competency of the cosmetics group and cosmetics-related services, the halal auditors must at least have a bachelor's degree in chemistry, biochemistry, biology, pharmacy, or medicine;
   d. for the scope of competency of the used goods group and services related to used goods, the halal auditors must at least have a bachelor's degree in forestry, chemistry, biochemistry, biology, medicine, pharmacy, or industrial engineering;
   e. for the scope of competency of the chemical product group and services related to chemical products, the halal auditors must at least have a bachelor's degree in chemistry or biochemistry;
   f. for the scope of competency of the group of biological products and genetically engineered products, as well as services related to biological products and genetically engineered products, the halal auditors must at least have a bachelor's degree in biology or medicine; and
   g. for the scope of competency of the slaughtering services group, the halal auditors must at least have a bachelor's degree in veterinary medicine or animal husbandry.

D. ACCREDITATION AND/OR CONFORMITY ASSESSMENT FEES FOR FOREIGN HALAL CERTIFICATION BODIES
   1. FHCB's Accreditation and/or Conformity Assessment fee is charged to the applying FHCBs.
   2. The Halal Product Assurance Organizing Agency (BPJPH) determines and publishes the cost components for FHCB's accreditation and/or conformity assessment in accordance with applicable laws and regulations.
   3. FHCBs are responsible for covering the costs of visa processing, travel insurance, transportation, accommodation, and daily allowances outside of the assessment period, in accordance with the Input Cost Standards set by the Indonesian Minister of Finance.
   4. FHCBs must pay the fees listed in section 3 to the BPJPH Managed Fund account using one of the following methods:
      a. Bank Tabungan Negara Syariah, account number 7201888817 in the name of RPL 133 BLU BPJPH UTK DK;
      b. Bank Muamalat Syariah, account number 3010808888 in the name of RPL 133 BLU BPJPH UTK DK; or
      c. Bank Syariah Indonesia, account number 1110201717 in the name of RPL 133 BLU BPJPH UTK DK.
      d. Bank Muamalat Syariah, account number 3010808888 in the name of RPL 133 BLU BPJPH UTK DK.

      The following procedure must be followed for payment:
      a. The Secretariat prepares a nominal cost statement for the accreditation and/or conformity assessment, including the costs of visa processing, travel insurance, transportation, accommodation, and/or daily allowances outside of the assessment period.
      b. The Secretariat sends a billing invoice to the FHCB.
      c. The FHCB submits proof of payment to the Secretariat.

E. FHCBs settle the payment of accreditation and/or conformity assessment fees prior to the execution of assessment verification and field inspection by transferring such fee to the Managed Fund account of BLU BPJPH and proof of payment must be uploaded electronically via SIHALAL.

APPLICATION FOR ACCREDITATION AND/OR CONFORMITY ASSESSMENT OF FOREIGN HALAL CERTIFICATION BODIES

   1. The process of applying for FHCB accreditation is conducted by/due to:
      a. FHCBs whose country does not possess any regional or internationally recognized accreditation institution; or
      b. FHCB's willingness to apply for accreditation directly to the Halal Product Assurance Organizing Agency (BPJPH).
   2. The accreditation as intended in number 1 is carried out by the LPH accreditation team through an assessment of compliance with ISO/IEC 17065 and Indonesian halal standards.
   3. FHCB conformity assessment is carried out on FHCBs that have been accredited as halal certification institutions based on ISO/IEC 17065 issued by accreditation institutions that are members of the International Accreditation Forum Multilateral Recognition Arrangement (IAF MLA), The Standards and Metrology Institute for the Islamic Countries (SMIIC), and/or International Halal Accreditation Forum (IHAF).
   4. The conformity assessment, as mentioned in number 3, is carried out by the FHCB assessment team assigned by the head of BPJPH to assess compliance with Indonesian halal product assurance standards on technical and sharia aspects.

5. The stages of the FHCB accreditation and/or conformity assessment process are as follows:
   a. The FHCB submits an application via SIHALAL, based on the type of application (accreditation and/or FHCB conformity assessment);
   b. A verifier verifies the completeness of the required documents;
   c. An invoice is issued and the FHCB pays the FHCB accreditation and/or conformity assessment fees;
   d. Assessors check the adequacy and validity of the documents (on desk);
   e. A field assessment is conducted;
   f. The assessment team evaluate the results of the assessment;
   g. The accreditation team makes a decision on whether to issue a recommendation letter;
   h. An accreditation certificate and/or certificate of conformity assessment results is issued; and
   i. A Mutual Recognition Agreement is signed.
6. FHCB leaders submit the application for accreditation and/or conformity assessment to the Head of BPJPH.
7. FHCB leaders submit the application for accreditation and/or conformity assessment to the Head of BPJPH via SIHALAL.
8. The applicants are required to submit the following records and documents:
   a. Proof of legal establishment of the institution, such as permission or recommendation from local state authorities;
   b. Proof of office and equipment ownership or rental, including:
      1. A copy of the land and building tax bill, electricity/water bill, or rental agreement; and
      2. Photos of buildings, rooms, and office equipment;
   c. A complete organizational structure document, describing HR competency and the principle of impartiality (independent, unbiased, and free from conflicts of interest), especially the existence of a halal auditor, sharia board/fatwa board, and impartiality committee;
   d. A list of sharia council/fatwa council or ulama personnel, consisting of at least 3 (three) people with competency in understanding products (goods/services) from an Islamic legal perspective, as proven by:
      1. A minimum education certificate of a bachelor's degree in the field of Islamic religion;
      2. A curriculum vitae of each member of the sharia board;
      3. An identity card of each member of the sharia board.
      4. A letter of appointment from the FHCB leadership as a member of the sharia council.
      5. Training or competency certificate in the field of determining halal product fatwas and/or halal product guarantee systems.
   e. A list of halal auditor personnel, consisting of at least 3 (three) Muslims, as proven by:
      1. A minimum education certificate of a bachelor's degree in accordance with the proposed scope of competency.
      2. A curriculum vitae of each halal auditor.
      3. An identity card of each halal auditor.
      4. A letter of appointment from the FHCB leadership as a halal auditor.
      5. A training certificate and/or competency certificate in accordance with Indonesian halal auditor competency standards from a halal auditor/halal supervisor training institution approved by BPJPH or a professional certification body.

f. Halal certification scheme documents according to the proposed scope of competency;
g. An accreditation certificate as a foreign halal certification body based on ISO/IEC 17065 issued by accreditation bodies that are members of the International Accreditation Forum Multilateral Recognition Arrangement (IAF MLA), The Standards and Metrology Institute for the Islamic Countries (SMIIC), and/or the International Halal Accreditation Forum (IHAF), for FHCBs that apply only for this type of conformity assessment;
h. Proof of laboratory ownership or proof of a cooperation agreement with another laboratory accredited to ISO 17025:2017 from an accreditation institution recognized by the International Laboratory Accreditation Cooperation Mutual Recognition Arrangement (ILAC MRA) according to the scope of FHCB competence;
i. A list of laboratory resource competencies (scope of testing, accreditation status from an accreditation institution recognized by the International Laboratory Accreditation Cooperation Mutual Recognition Arrangement (ILAC MRA), test methods, instruments used, and laboratory analyst staff);
j. A list of human resource competencies in the position of halal auditor (name, educational background, training and/or competency certificate, training and competency certificate issuing institution, assigned scope of competency); and
k. The latest quality guideline documents and supporting quality guidelines in accordance with SNI ISO/IEC 17065:2012.

F. REVIEW OF ACCREDITATION AND/OR CONFORMITY ASSESSMENT APPLICATIONS FOR FOREIGN HALAL CERTIFICATION BODIES

1. A team of verifiers will check the completeness of all applications for accreditation and/or conformity assessment submitted by FHCBs within 5 working days of receipt.
2. If any required documents are missing, BPJPH will notify the FHCB via SIHALAL and request the additional documents.
3. FHCBs must upload the additional documents within 15 (fifteen) working days of receiving the request.
4. If an FHCB fails to upload the additional documents within 15 (fifeen) working days, the application will be rejected.
5. If FHCB's application for accreditation or conformity assessment is rejected, FHCB can reapply within 7 (seven) working days of the rejection.
6. Within 5 working days, the verifier will check if FHCB has uploaded the additional required documents listed in point 3.
7. If the additional required documents are complete, the verifier will issue an invoice for the accreditation and/or conformity assessment within 2 (two) working days.
8. FHCBs must pay the invoice within 5 (five) working days of its issuance and upload proof of payment to SIHALAL.
9. The secretariat team will inform FHCBs of the assessment schedule within 10 (ten) working days.
10. The secretariat will submit the FHCB's documents to the assessor for document verification (on-desk assessment) via video conference at least 5 working days before the on-desk assessment is conducted.
11. FHCBs must correct any discrepancies in the results of the on-desk assessment before the on-site assessment is conducted.
12. The FHCB assessment team will conduct the on-site assessment.
13. FHCBs must address any nonconformities found in the on-desk and on-site assessments within 14 (fourteen) working days.

14. The assessor will review the FHCB's proof of improvement within 7 (seven) working days.
15. If the FHCB has not fully addressed all discrepancies, the FHCB must correct them within 14 (fourteen) working days.
16. The assessor will review the FHCB's proof of correction within 7 (seven) working days.
17. If the FHCB has still not fully addressed all discrepancies, the FHCB must correct them within 14 (fourteen) working days.
18. The assessor will conduct a final review of the FHCB's proof of improvement within 7 (seven) working days.
19. If the FHCB has met all requirements, the assessor will discuss the results with the assessment team.
20. If the FHCB has not met all requirements, the assessor will discuss the results with the assessment team to determine the next steps.
21. The assessment team will discuss the FHCB's assessment results within 10 (ten)working days of the document review or revision deadline.
22. If the FHCB is only applying for conformity assessment, and the assessment team approves the results without any notes, a certificate of conformity assessment will be issued within 15 (fifteen) working days.
23. If the assessment team has any notes, the FHCB must address them within 15 (fifteen) working days.
24. If the FHCB fails to address the assessment team's notes within 15 (fifteen) working days, the application for accreditation and/or conformity assessment will be rejected.
25. If the application for accreditation and/or conformity assessment is rejected, the FHCB can reapply no sooner than 6 (six) months after the application is rejected.
26. If the FHCB is applying for accreditation and the assessment team approves the conformity assessment results, the FHCB will be scheduled for a discussion with the accreditation team.
27. The discussion with the accreditation team will take place within 10 (ten) working days of the documents being deemed compliant.
28. If the accreditation team approves the accreditation without any notes, the implementing council will issue a letter of recommendation as the basis for issuing an accreditation certificate.
29. If the accreditation team has any notes, the FHCB must address them within 15 (fifteen) working days.
30. If the FHCB fails to address the accreditation team's notes within 15 (fifteen) working days, the application for accreditation and/or conformity assessment will be rejected.
31. If the application for accreditation and/or conformity assessment is rejected, the FHCB can reapply no sooner than 6 months after the application is rejected.
32. If BPJPH finds evidence that the FHCB has committed fraud, deception, falsification, or deliberately concealed information, either when submitting an application or during the accreditation and/or conformity assessment process, BPJPH will reject the application, stop or cancel the accreditation and/or conformity assessment process, and the FHCB will not be allowed to reapply.

G. FIELD ASSESSMENT ACTIVITIES FOR ACCREDITATION AND/OR CONFORMITY ASSESSMENT OF FHCB
1. The Secretariat will identify the competency requirements of the assessors to be assigned, the composition of the assessment team (leader

and members), and the number of man-days required based on the scope of the application submitted.

2. The assessment team will consist of the following members: the assessment team leader, secretariat, technical assessors and competent sharia assessors in accordance with the FHCB's scope of competence.
3. The Secretariat will report the plan for conducting document validity verification and field assessments to the Head of BPJPH in writing, electronically, and/or via SIHALAL.
4. The Head of BPJPH will approve the assessment team based on the Secretariat's proposal.
5. The Secretariat will inform the FHCB of the assigned assessment team and the assessment implementation schedule.
6. The FHCB may submit objections in writing, electronically, and/or via SIHALAL against the assigned assessment team for reasons related to conflicts of interest, and/or other logical and rational reasons.
7. FHCB can approve or object to the assessment team members in writing, electronically, or through SIHALAL documents. If FHCB objects, the FHCB leadership must submit the objection to the Head of BPJPH/Chair of the Executive Board within 3 (three) working days of receiving the information about the assessment team from point 5.
8. The Head of BPJPH appoints and assigns the head of the assessment team, secretariat, technical assessor, and sharia assessor to check the validity of documents and/or conduct field assessments.
9. The assessment team verifies the requirements and supporting documents by:
   a. Checking the validity of documents

      This is done by reviewing the documents without visiting FHCB.
   b. Field inspection

      If the documents are valid, the assessment team conducts a field inspection at the FHCB's office. In special or emergency circumstances, remote assessment methods can be used.
10. Special or emergency circumstances are determined by the Head of BPJPH and/or Chair of the Executive Board based on specific/special/emergency considerations.
11. Field Assessment Procedures are as follows:
    a. The assessment team will create an assessment agenda based on the scope of competency proposed by the FHCB.
    b. The Secretariat will submit the assessment agenda to the FHCB before the field assessment.
    c. The assessment team leader will coordinate the assessment plan with team members, including:
       1) Scope of competence and scope of FHCB activities;
       2) Distribution of team members during field assessment activities;
       3) Details of the assessment, including methods, techniques, objectives, and reporting;
       4) Completion of accreditation and/or FHCB conformity assessment instruments; and
       5) Documents regarding FHCB accreditation and/or conformity assessment requirements.
    d. FHCB accreditation and/or conformity assessment instruments will be in the attached format.

e. The assessment team leader will lead the assessment opening meeting, which will be attended by team members and FHCB management. The team leader will inform the attendees of the following:
   1) Members of the assessment team and the duties of each member;
   2) Objectives of the assessment;
   3) Scope of competence and scope of FHCB activities, criteria for accreditation requirements and/or FHCB conformity assessment, assessment procedures, and nonconformity categories;
   4) Confirmation of the companion for the assessment team from the FHCB representative, and explanation of the function of the companion;
   5) Assurance of the confidentiality of all information collected from the assessment process;
   6) Assessment agenda;
   7) Special working hours and place for the assessment team;
   8) Opportunity for the FHCB to ask questions related to assessment activities; and
   9) Explanation of the closing meeting and its location.

f. The assessment team will conduct the assessment in accordance with the agreed-upon assessment agenda.

g. The assessment team will record all findings discovered during the assessment. Any non-conformity findings must be based on a risk-based approach in accordance with SNI ISO/IEC 17065:2012 and conformity with Indonesian halal standards, and must be accompanied by references to normative documents.

h. Before the closing meeting, the assessment team will hold a meeting to review and consider the findings, identify important issues, and write a summary report. The summary report will contain the following information:
   1) Whether the FHCB has met the relevant resource requirements, in accordance with the proposed scope of competency;
   2) Whether the FHCB has complied with the SNI ISO/IEC 17065:2012 conformity assessment process and conformity with Indonesian halal standards;
   3) Whether the FHCB has complied with quality management system requirements; and
   4) Summary of findings.

i. The closing meeting will be led by the assessment team leader and will provide an opportunity for the FHCB to ask questions and provide comments. The assessment team leader will also inform the FHCB of the time frame for corrective action.

H. EVALUATION OF ACCREDITATION AND/ OR CONFORMITY ASSESSMENT RESULTS FOR FOREIGN HALAL CERTIFICATION BODIES AND ISSUANCE OF CERTIFICATE OF CONFORMITY ASSESSMENT RESULTS

1. After receiving the assessment results report, the Head of BPJPH and/or the Executive Board will assign a team of assessors to review the report and provide technical considerations.
2. The assessment team for assessment results will consist of at least 3 (three) people with the appropriate competencies and who consider the risks related to the scope of competence and scope of activities of the foreign halal certification bodies (FHCB).

3. The assessment team will provide technical and Sharia considerations by reviewing the assessment results report submitted by the assessment team secretariat.
4. In conducting the review, the assessment team will examine the following aspects of the assessment results:
   a. Whether the accreditation and/or conformity assessment process was carried out in accordance with the requirements;
   b. Whether the FHCB has addressed any discrepancies identified in the assessment results;
   c. The FHCB's ability to meet the accreditation and/or conformity assessment requirements;
   d. The FHCB's ability to meet the SNI ISO/IEC 17065:2012 standard for accreditation applications;
   e. The FHCB's ability to meet the halal standards in accordance with the Indonesian Halal Product Authority (SJPH) standards and Sharia provisions based on the fatwa of the Indonesian Ulema Council for conformity assessment applications;
   f. The scope of competence and scope of activities requested, verified, and recommended by the assessment team.
5. The assessment team will provide verification notes on the assessment results submitted by the secretariat team.
6. The results of the discussion in the assessment team for the assessment of accreditation applications will be followed up by the LPH Accreditation Team to provide recommendations and issue an Accreditation Certificate.
7. The results of the assessment team's discussion on the conformity assessment application are submitted to the Head of BPJPH for issuance of a Certificate of Conformity Assessment Results.
8. The Certificate of Conformity Assessment Results is valid for 4 (four) years from the date of issuance.
9. The FHCB must apply for an extension to the Certificate of Conformity Assessment Results at least 60 (sixty) working days before the end of the validity period.
10. If the FHCB needs to take follow-up action on the assessment team's verification notes on the assessment results, the secretariat team will send a letter to the FHCB requesting them to make the necessary corrections.
11. The FHCB must make the improvements no later than 15 (fifteen) working days from receipt of the notification letter from the secretariat team.
12. If the 15-working-day period has passed and the FHCB has not made the necessary improvements, the application for accreditation and/or conformity assessment will be rejected.
13. If the application for accreditation and/or conformity assessment is rejected, the FHCB may reapply no sooner than 6 (six) months after the rejection.
14. If the FHCB submits an application for accreditation after completing the discussions with the assessment team and the improvements to the assessment team's records are deemed satisfactory, the application will be scheduled for discussion with the accreditation team.

I. ISSUANCE OF RECOMMENDATION LETTER AND ACCREDITATION CERTIFICATE

1. Within 10 (ten) working days, the secretariat team will schedule a discussion of the assessment results that have met the requirements.
2. If the LPH Accreditation Team determines that the requirements have been met and there are no improvement notes, the Executive Board will issue a letter of recommendation as the basis for issuing an accreditation certificate.
3. If the LPH Accreditation Team still has improvement notes, the FHCB must complete the improvements within 15 (fifteen) working days.
4. If the 15-working-day period has passed and the FHCB has not made the necessary improvements, the application for accreditation and/or conformity assessment will be rejected.
5. If the application for accreditation and/or conformity assessment is rejected, the FHCB may reapply no sooner than 6 (six) months after the rejection.
6. The accreditation certificate is valid for 4 (four) years from the date of issuance.
7. The FHCB must apply for reaccreditation or extension of the accreditation certificate at least 60 (sixteen) working days before the validity period ends.
8. Reaccreditation and/or extension of conformity assessment is carried out by means of a reassessment.

J. FORMULATION AND SIGNING OF INTERNATIONAL AGREEMENT OR MEMORANDUM OF MUTUAL UNDERSTANDING (MUTUAL RECOGNITION ARRANGEMENT/MRA)

1. Mutual recognition and mutual acceptance of FHCBs is carried out through an international agreement between countries or through a memorandum of mutual understanding (MRA).
2. International agreements between countries or MRAs as referred to in point 1 must be submitted through diplomatic channels.
3. International agreements between countries or MRAs are negotiated and coordinated with the ministry responsible for foreign affairs.
4. Specific procedures for preparing, negotiating, and approving international agreements between countries or MRAs are set forth in applicable laws and regulations.
5. International agreements between countries or MRAs as referred to in point 4 are made between the Indonesian government and the government of the FHCB's country of origin.
6. The results of accreditation and/or conformity assessment, as well as international agreements between countries or MRAs, form the basis for formulating an MRA.
7. BPJPH enters into MRAs with:
   a. Government FHCBs; and/or
   b. Non-government FHCBs.
8. MRAs with non-government FHCBs must be recognized by the relevant government authority in the FHCB's country of origin, as evidenced by a letter from the competent authority.
9. MRAs must contain the following information:
   a. Technical provisions for mutual recognition and mutual acceptance of halal certificates;
   b. Scope of activities and scope of FHCB competency approved by BPJPH;

c. MRA validity period;
d. Name and address of FHCB approved by BPJPH

10. BPJPH coordinates with the following ministries and institutions on the implementation plan and contents of the MRA:
    a. Ministry of Foreign Affairs;
    b. Ministry of Trade;
    c. Ministry of Agriculture;
    d. Ministry of Industry;
    e. Ministry of Health; and/or
    f. Other relevant ministries and institutions.
11. After coordination with the relevant ministries and institutions, BPJPH submits a draft MRA to the FHCB's country of origin, facilitated by the ministry responsible for foreign affairs.
12. BPJPH coordinates and consults with the ministry responsible for foreign affairs on the MRA text.
13. The final MRA text is signed after obtaining approval from the Minister of Religious Affairs through the Head of BPJPH.
14. The Head of BPJPH signs the MRA with:
    a) Officials of the same level from the FHCB's country of origin;
    b) Head of government FHCB; and/or
    c) Non-government FHCB leaders.
15. The validity period of the MRA is in accordance with the agreement between the parties, from the date of signing, taking into account the umbrella memorandum of understanding (MoU) between countries (bilateral).

K. SURVEILLANCE

1. The Head of BPJPH appoints a team to carry out two types of scheduled assessments during the validity period of an accreditation certificate and/or conformity assessment certificate:
    a. Surveillance Assessment; and
    b. Witness Assessment.
2. Surveillance is carried out to monitor the fulfillment of accreditation requirements and/or mutual recognition and acceptance within the validity period of the MRA.
3. The secretariat proposes an assessment team to carry out surveillance to the Head of BPJPH and/or the Executive Board in writing, electronically, and/or via SIHALAL.
4. The Head of BPJPH and/or the Executive Board approves the assessment team based on the secretariat's submission in writing, electronically, and/or via SIHALAL.
5. The Head of BPJPH and/or the Executive Board informs the FHCB of the appointed assessment team.
6. The FHCB may object to the assessment team on the grounds of conflict of interest or other logical/rational reasons.
7. Objections from the FHCB must be submitted via SIHALAL.
8. The Head of BPJPH assigns and determines the chairman and members of the assessment team to carry out surveillance of the FHCB.
9. Surveillance is carried out in accordance with the requirements of SNI ISO/IEC 17065:2012 (sections 7.4, 7.5, and 7.6) and SNI ISO/IEC 17067:2013.

10. Onsite surveillance is carried out once during the validity period of the accreditation certificate and/or certificate of conformity assessment results, no later than the 24th month from the date of issuance.
11. Remote surveillance is carried out twice during the validity period of the accreditation certificate and/or certificate of conformity assessment results, in the 12th and 36th months from the date of issuance.
12. Onsite surveillance is carried out simultaneously with witness assessments.
13. If a non-conformity is found during surveillance that has a significant impact on the FHCB's competence and cannot be corrected within the specified time, the Head of BPJPH may take the most severe action of suspension the accreditation certificate and/or conformity assessment certificate.
14. The accreditation certificate and/or conformity assessment certificate may be suspended for a maximum of 3 months for the entire scope of the FHCB's accreditation and/or conformity assessment competencies.
15. If the FHCB cannot reactivate its accreditation or conformity assessment status within 3 months, the Head of BPJPH may take the lightest action of reducing part of the FHCB's scope of competence, or the most severe action of suspending/revoking/terminating the accreditation certificate and/or conformity assessment certificate.
16. Based on the recommendations of the Surveillance Team, the Head of BPJPH may revoke the status or reduce part of the scope of the FHCB's accreditation and conformity assessment competencies.
17. After the surveillance process is complete, the FHCB will receive confirmation of its accreditation status and/or conformity assessment through SIHALAL.
18. For surveillance, reaccreditation, scope expansion, and witness assessment, corrective actions must be completed within a maximum of 14 working days and verification of corrective actions must be completed within a maximum of 7 working days.

L. WITNESS ASSESSMENT

1. Witness assessments are carried out in accordance with the following provisions:

Total Scope of FHCB Competencies	Number of Competency Scope Samples to be Assessed in One Cycle
1 to 5	2
5 to 10	4
10 to 15	6

2. The witness assessment will focus on competency scopes that have high complexity or high risk.
3. The FHCB must provide the following information related to the activities that will be assessed:
   a. Types and activity plans;
   b. Institutional profile;
   c. Records of certification applications and review of client applications;

d. Inspection procedures; and
e. Curriculum vitae, training/competency certificates relevant to the scope of activity scheme and initial evaluation records of personnel carrying out the inspection.

4. An onsite witness assessment will be carried out once during the validity period of the accreditation certificate and/or certificate of conformity assessment results, no later than the 24th month from the date of issuance.
5. A remote witness assessment will be carried out once during the validity period of the accreditation certificate and/or certificate of conformity assessment results, no later than the 40th month from the date of issuance.

M. CHANGES IN THE DATA OF FOREIGN HALAL CERTIFICATION BODIES

1. FHCBs must report any changes to their data to BPJPH, including:
   a. Number and name of halal auditors;
   b. Number and name of Islamic sharia councils;
   c. Scope of FHCB activities;
   d. FHCB name;
   e. Office address; and/or
   f. Ownership and/or cooperation status of an accredited laboratory.
2. In addition to the changes listed above, FHCBs must also report any changes to the following FHCB data to BPJPH:
   a. Halal auditor competency;
   b. Scope of FHCB competency; and/or
   c. FHCB organizational structure and management.
3. Reports of changes to FHCB data must be accompanied by supporting documentation.
4. The secretariat will review the completeness of the supporting documentation and verify the changes to the FHCB data.
5. Based on the results of the secretariat's review and verification, document validation and/or unscheduled surveillance may be carried out.
6. The secretariat will verify changes to the FHCB data using document validation if the changes do not have an impact on the FHCB's competency or examination results.
7. If the changes have an impact on the FHCB's competency or examination results, the Head of BPJPH will assign an assessment team to verify the changes to the FHCB data through a field visit.
8. In special circumstances or conditions, unscheduled surveillance may be carried out using remote assessment methods.
9. Special circumstances or conditions will be determined based on certain considerations from the Head of BPJPH and/or the Executive Board.
10. The secretariat will submit a report of the verification results to the Head of BPJPH and/or the Executive Board.
11. Changes to FHCB data that do not result in changes to the scope of competency will not change the FHCB registration number.

N. REACREDITATION AND/OR EXTENSION OF MUTUAL ACCREDITATION RECOGNITION AND/OR CONFORMITY ASSESSMENT

1. FHCBs can extend their accreditation status and/or certificate of conformity assessment results by submitting a request to the Head of BPJPH no later than 60 working days before the expiration date.
2. The procedures for reaccreditation and/or extension of conformity assessment are the same as the procedures for initial accreditation

and/or conformity assessment.

3. If an FHCB does not submit a request for extension, its accreditation status and/or certificate of conformity assessment will be declared invalid on the expiration date.
4. This will also result in the revocation of the FHCB's MRA status.
5. The FHCB can submit a request to reactivate its MRA status after it has obtained a decision to extend its accreditation status and/or certificate of conformity assessment results.
6. If an FHCB's extension has been inactive, its application for accreditation and/or conformity assessment will be treated as an application for initial accreditation and/or conformity assessment.
7. If an FHCB has submitted a request for extension but has not received a decision before the expiration of the MRA cooperation, its accreditation status and/or certificate of conformity assessment will be declared invalid for the scope specified in the collaboration with BPJPH, including products exported and/or circulating in the territory of the Unitary State of the Republic of Indonesia, until the MRA cooperation is reissued.
8. Registration of Halal Certificates for Products whose scope of competency accreditation and/or FHCB conformity assessment is revoked and/or the validity period has expired will become invalid.

O. ADDITION TO THE SCOPE OF ACCREDITATION AND/OR CONFORMITY ASSESSMENT

1. FHCBs can apply for additional scope of activities and/or scope of competency for accreditation and/or conformity assessment by submitting a request to the Head of BPJPH.
2. The procedure of implementation, corrective actions, and the making of decisions in adding the scope of activity and/or scope of accreditation competency and/or conformity assessment is conducted with the same procedure carried out during the first application.

P. CONFIDENTIALITY

1. The Head of BPJPH and/or the Executive Board ensures that all internal and external personnel maintain confidentiality in assessment activities by signing a confidentiality agreement.
2. The Head of BPJPH and/or the Executive Board will provide information regarding FHCB to third parties only with written consent from the FHCB. In the event that applicable Indonesian legislation, the decisions made by courts and/or arbitration and alternative dispute resolution agencies with permanent legal force, and/or for the sake of law enforcement proposed by law enforcement officers in writing, requires disclosure of such information to third parties, the Head of BPJPH and/or the Executive Board will inform the FHCB beforehand, so long as the information does not violate applicable legislation.

Q. RIGHTS AND OBLIGATIONS OF ACCREDITED AND/OR CONFORMITY ASSESSED FHCBs

1. Accredited and/or conformity assessed FHCBs have the following rights:
   a. to issue and revoke halal certificates issued by FHCBs;
   b. to enforce the use of the Indonesian halal label and FHCB's halal logo on products that have been labeled with a halal certificate and will be exported to Indonesia;
   c. to obtain information about changes in the accreditation requirements and/or conformity assessment;
   d. to submit complaints and appeals to BPJPH; and

e. to submit requests for additions, reductions, suspensions and revocations of the scope of competency for accreditation and conformity assessment.

2. Accredited and/or conformity-assessed FHCBs have the following obligations:
   a. to fulfill the criteria and requirements for accreditation and/or conformity assessment and make adjustments if there are changes to the requirements;
   b. to fulfill accreditation and/or conformity assessment requirements;
   c. to provide access to the assessment team in implementing accreditation activities and/or conformity assessment;
   d. to use accreditation authority and/or conformity assessment in accordance with the scope of competency provided;
   e. to maintain the good name and reputation of BPJPH in FHCB's home country and at the international level;
   f. to inform BPJPH if there are changes to the fulfillment of requirements or supporting documents for accreditation and conformity assessment;
   g. to ensure that the information and documentation submitted to the assessment team is always up to date and under control;
   h. to pay the fees for accreditation services and/or conformity assessment in accordance with the provisions stipulated by BPJPH; And
   i. to provide access to the Head of BPJPH and/or the Executive Board in conducting investigations in resolving complaints against FHCB.

R. COMPLAINT

1. FHCBs can submit complaints about the assessment process and the performance of the assessment team to the Head of BPJPH and/or the Executive Board in writing, electronically, or via SIHALAL.
2. The Head of BPJPH and/or the Executive Board will follow up on complaints about the assessment process and the performance of the assessment team.

S. APPEALS

1. FHCBs can submit an appeal to the Head of BPJPH within 5 (five)working days of signing the MRA collaboration if they object to the results of the accreditation determination and/or conformity assessment.
2. The appeal must include the reasons for the objection and the following attachments:
   a. The signed MRA cooperation;
   b. The establishment requirements and supporting documents submitted when applying for accreditation and/or conformity assessment; and
   c. Any other documents supporting the reasons for the objection.
3. The Head of BPJPH will form an Appeals Team of up to 5 people, consisting of:
   a. A Chairperson (who is also a member of the team); and
   b. Members.
4. The members of the Appeals Team must not be members of the assessment team.
5. The Appeals Team will investigate and resolve all objections to the results of the accreditation determination within 30 working days of receiving the appeal request from the Head of BPJPH.

T. SUSPENSION AND REVOCATION OF ACCREDITATION STATUS AND/OR CONFORMITY ASSESSMENT, AND REDUCTION OF THE SCOPE OF ACCREDITATION AND/OR CONFORMITY ASSESSMENT

1. Suspension of Accreditation Status and/or Conformity Assessment
   a. The Head of BPJPH can suspend the accreditation status and/or conformity assessment of all or part of FHCB's scope of accreditation competency and/or mutual recognition and mutual acceptance if:
      1) FHCB voluntarily requests suspension of accreditation status and/or conformity assessment;
      2) FHCB fails to facilitate field inspection/surveillance visits;
      3) An investigation of complaints against FHCB by the Head of BPJPH shows that FHCB is not in compliance with accreditation requirements and/or conformity assessment; and/or
      4) FHCB violates provisions related to accreditation and/or conformity assessment or violations related to the implementation of Halal Product assurances which are in contact with FHCB's obligations.
   b. The Head of BPJPH will assign the Assessment Team to verify and validate the reasons for the suspension of FHCB's accreditation status and/or conformity assessment.
   c. The Assessment Team will submit the results of the verification and validation of the causes of suspension of accreditation status and/or FHCB conformity assessment to the Head of BPJPH.
   d. If the results of the verification and validation show that FHCB has fulfilled the suspension aspects, the Head of BPJPH will issue a letter of suspension of accreditation status and/or conformity assessment.
   e. Suspension of accreditation status and/or conformity assessment may include suspension of all or part of the scope of competence.
   f. The Head of BPJPH will submit a letter of notification of suspension of accreditation status and/or conformity assessment, along with the cause of the suspension, to FHCB.
   g. FHCB with the status of suspended accreditation and/or conformity assessment is not permitted to carry out inspection and/or testing activities that are included in the scope of its accreditation, and cannot use the SHLN logo and registration number for products exported and/or circulating in the territory of the Unitary State of the Republic of Indonesia.
   h. FHCB must follow up on the cause of the suspension within 90 calendar days after receiving the notification report from the Head of BPJPH;
   i. If FHCB has followed up on the cause of the suspension, the Assessment Team will verify the follow-up;
   j. If the results of the follow-up verification are approved by the Assessment Team, the Assessment Team will propose reactivation of accreditation status and/or conformity assessment to the Head of BPJPH;
   k. The Head of BPJPH will issue a notification letter for reactivation of accreditation status and/or conformity assessment; and
   l. If FHCB does not follow up on the cause of suspension within 90 calendar days, the Assessment Team will propose revocation of accreditation status and/or conformity assessment to the Head of BPJPH.

2. Revocation of Accreditation Status and/or conformity assessment
    a. The Head of BPJPH can revoke the accreditation status and/or conformity assessment of an FHCB if:
        1) The FHCB does not complete the reasons for suspension of accreditation and/or conformity assessment within the specified time period;
        2) The FHCB voluntarily requests that its accreditation status and/or conformity assessment be revoked; and/or
        3) The FHCB is proven to have committed fraud, forgery, cheating, or other violations related to FHCB accreditation and/or conformity assessment, or legal violations related to the implementation of Halal Product assurances, which are in contact with FHCB's obligations, or other legal violations that cause the status of the legal entity or institution to be lost.
    b. The Head of BPJPH will assign an assessment team to verify and validate the reasons for accreditation revocation and mutual recognition and acceptance.
    c. The assessment team will submit the results of the verification and validation to the Head of BPJPH. If the results of the verification and validation show that the revocation aspects have been met, the Head of BPJPH will issue a decision to revoke the accreditation.
    d. If the accreditation revocation and/or conformity assessment has been verified and validated, the Head of BPJPH shall determine the decision of revocation.
    e. The Head of BPJPH will convey the decision to revoke accreditation to FHCB.
3. Reduction of the Scope of Competency
    a. The Head of BPJPH can reduce the scope of competency of an FHCB if:
        1) The FHCB voluntarily requests that its scope of competency be reduced;
        2) The FHCB does not meet the requirements for its scope of competency, such as:
            a) Reduced Halal Auditor resources;
            b) Unavailability of laboratories accredited to ISO 17025; and
            c) Unavailability of Sharia Board resources.
    b. The Head of BPJPH will assign an assessment team to verify and validate the reasons for the reduction in the scope of competency.
    c. The assessment team will submit the results of the verification and validation to the Head of BPJPH.
    d. If the results of the verification and validation show that the aspects for reduction of the scope of competency have been met, the Head of BPJPH will issue a decision to reduce the scope of competency through changes or addendums to the MRA agreed with the FHCB.
    e. The Head of BPJPH will convey the changes or addendums to the MRA to the FHCB.

U. NOTIFICATION OF CHANGES IN ACCREDITATION REQUIREMENTS AND/OR CONFORMITY ASSESSMENT
1. If BPJPH makes any changes to the accreditation requirements and/or conformity assessment, BPJPH will notify FHCB.
2. FHCB will be given sufficient time to make adjustments to the changes in accreditation requirements and/or conformity assessment.

V. DISPUTE RESOLUTION

1. In the event of a dispute or disagreement about the accreditation and/or conformity assessment process, BPJPH, the assessment team, and FHCB will try to resolve it through consensus, consultation, and negotiation.
2. If they cannot resolve the dispute within 60 calendar days, they will try to resolve it through mediation with a certified mediator.
3. If they cannot resolve the dispute through mediation within 60 calendar days, BPJPH and/or FHCB may review the MRA.
4. During the dispute resolution process, BPJPH, the assessment team, and FHCB will continue to fulfill their respective obligations and responsibilities.

W. REMOTE ASSESSMENT

1. If an on-site assessment is not possible, a remote assessment may be carried out.
2. Remote assessments can be carried out for accredited and or assessed FHCBs for conformity.
3. Remote assessments can be conducted entirely remotely or in a combination of remote and on-site assessments.
4. FHCBs must meet the following prerequisites to conduct a remote assessment:
   a. FHCB shall provide all the infrastructure needed for the remote assessment process to run smoothly, such as an internet connection, computer and/or smartphone, and software. The assessment team will test/check the readiness of this infrastructure before carrying out the remote assessment.
   b. FHCB shall present members of management, technical personnel, and other key personnel who must be present for the remote assessment.
   c. FHCB shall provide the assessor with access to the documentation and records required during the online remote assessment so that the assessor can study the documents and records to determine their conformity for accreditation and/or conformity assessment requirements.
5. Procedures for carrying out remote assessments are as follows:
   a. The assessment team will communicate with FHCB regarding the arrangements and implementation of remote assessments, including IT infrastructure (see prerequisites) and the timing of the assessment. To facilitate communication, the assessment team will create a social media group consisting of FHCB personnel and appointed assessors.
   b. The team leader will discuss with the team members to determine what records and documents are needed for remote assessment purposes, including a number of inspection and/or test samples according to the scope of activities and scope of FHCB competence.
   c. The assessment team will communicate the need for documents and recordings to FHCB and ensure that all documents and recordings have been collected no later than 7 (seven) working days before carrying out the remote assessment.
   d. The opening meeting will be held via video conference using a previously agreed-upon medium (e.g., Google Meets, Zoom, Webex, etc.) and will be attended by all assessment team personnel and FHCB. The opening meeting procedures and materials are the same as those for an on-site assessment.

e. FHCB will determine the personnel responsible for accompanying the assessment team (each assessor will have at least one companion) and will be responsible for any findings of discrepancies and their observations and corrections. After the opening meeting, the team will be divided into separate communication media according to agreement to facilitate the remote assessment process for each accompanying personnel, including the use of email, chat, and video calls.
f. The assessment team will communicate and coordinate internally via the social media group that has been created. The team leader will coordinate closely with team members to monitor the progress of the assessment process.
g. The closing meeting will be held via video conference, like the opening meeting, and will be attended by all assessment team and FHCB personnel. The procedures and materials for the closing meeting are the same as those for an on-site assessment.

6. Procedures for reporting remote assessments are as follows:
   a. Assessment reporting is done according to the procedures in this Guideline; and

Proof of attendance is in the form of screenshots of photos of personnel involved in the opening and closing meetings.

CHAPTER III
OTHER
PROVISIONS

1. The time allowed for corrective action in the implementation of surveillance, reaccreditation and/or extension of conformity assessment, additional scope of activity/competency, and witness assessment (witness) is the same as the time allowed for corrective action in the initial accreditation application.
2. If the assessment team finds evidence that FHCB has falsified, cheated, and/or hidden information from the assessment team at any stage of the process, the assessment team must propose to the Head of BPJPH and/or the Executive Board to stop the accreditation and/or conformity assessment process.
3. The Head of BPJPH and/or the Executive Board will decide whether to terminate the accreditation and/or conformity assessment process based on the assessment team's proposal. The decision will be made in writing, electronically, and/or through SIHALAL.
4. The Head of BPJPH and/or the Executive Board will convey the decision to terminate the accreditation and/or conformity assessment process to FHCB in writing, electronically, and/or via SIHALAL.

CHAPTER IV
CLOSING

This guideline is used as a reference by stakeholders to properly implement accreditation and/or assess the conformity of FHCB.

THE HEAD OF THE HALAL PRODUCT

ASSURANCE ORGANIZING AGENCY

MUHAMMAD AQIL IRHAM

HCB Name : _____

1.3 HR Document Sufficiency Checklist **Reference Number** : _____ **for FHCB**

Halal Auditors **Implementation Date** : _____

BPJPH Assessor : _____

No.	Name of Halal Auditor	Education	DOCUMENT COMPLETENESS CHECKLIST							
			Certificates	CV	ID Card	Training Certificate	Competency Certificate	Halal Certificate Issuing Authority	Halal Auditor Statement Letter	Statement of Having a Halal Auditor

No.	Name of Halal Auditor	Education	DOCUMENT COMPLETENESS CHECKLIST							
			Certificate	CV	ID Card	Training Certificate	Competency Certificate	Certificate Issuing Institution	Halal Auditor Statement Letter	Statement Letter of Having an Auditor Halal

No.	Name of Halal Auditor	Education	DOCUMENT COMPLETENESS CHECKLIST							
			Certificate	CV	ID Card	Training Certificate	Competency Certificate	Certificate Issuing Institution	Halal Auditor Statement Letter	Statement Letter of Having an Auditor Halal

Evaluated by :

Signature :

Evaluation Date :

Notes :

6.1 ASSESSMENT AGENDA

FHCB Name : .....
Assessment Date : .....
Assessment team : 1. Name, position, scope covered
2. Name, position, scope covered
Type of Assessment : Pre-Assessment/Initial Assessment/Re-assessment/Surveillance/
Scope Expansion Assessment/Witness/Field Verification *)
Assessment Requirements Criteria: SNI ISO/IEC 17065:2012; Guidelines for Accreditation and/or Conformity Assessment of Foreign Halal Certification Body, SNI and/or Regulations related to JPH.

No	Time	Activities	Assessor	Assessed Unit and Assistant
Day....				

Chief Assessor,

(.....)

Information:

*) : Select one

6.2 BRIEF REPORT AND FINDINGS WORKSHEET

FHCB Name : .....
Reference Standards : .....
Assessment Date : .....

<table>
<tr>
<td>Assessment Team:

State the names and duties of the personnel in the team (team leader, assessor or expert)
<table><tr><th>Name</th><th>Job description in the team</th></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table></td>
<td>Assessment Objectives:

❑ First Assessment
❑ Reassessment
❑ Surveillance
❑ Scope Addition
❑ Witness Assessment
❑ .....</td>
<td>Findings:

Nonconformity:

Observation:</td>
</tr>
</table>

Improvements (10-a.01.a) are submitted to BPJPH/LPH Accreditation Team

Assessment Summary:

A brief description of the fulfillment of standard requirements implemented by FHCB

a. Fulfillment of General Requirements

b. Fulfillment of Structural Requirements

c. Fulfillment of Resource Requirements

d. Fulfillment of Process Requirements

e. Fulfillment of Management System Requirements

Required improvements for FHCBs

LIST OF FINDINGS

No.	Description	Clause	Category
1	…		Observational Discrepancies
2	…		

Corrective action will be completed by:_____

Assessment Team Recommendations (Recommended/less recommended scope)
FHCB records (if any)

……, ……

Team Leader: FHCB Leader:

(……) (……)

6.3 VERIFICATION REPORT

1. Type of Assessment :
2. FHCB Name :
3. Assessment Date :
4. Assessment Team :
5. Reference Standards:

A. Nonconformity Category

No.	Description of Nonconformity	Corrective Action (Accompanied by cause analysis, Correction and Corrective Action)	Proof of Corrective Action	Verification results and verification date
1.	…… … …… …… … …… Nonconformity Category: …… Nonconformity Clause: ……	Cause Analysis: Correction: Corrective Action:		
2.	Same as above	Same as above		
3.	Same as above	Same as above		

B. Observation Category

No	Description of Observation	Follow-up plan
1.	.....	.....
2.	Same as above	Same as above

Conclusions and recommendations (filled in by the assessment team after the final verification process is complete):

1. Fulfillment of standards and criteria requirements for Accreditation and/or Conformity Assessment of Foreign Halal Certification Body: Qualified/Unqualified
2. Recommendations for the Status of Accreditation and/or Conformity Assessment of Foreign Halal Certification Body: recommended/ not recommended/ prolonged.
3. Recommended scope: as requested/with changes*)

*) if any

- Revised scope: .....
- Scope not provided: .....

Reported by:

(Name of the Assessment Team Leader)

7.1 EVALUATION WITNESS REPORT OF FOREIGN HALAL CERTIFICATION BODIES

Name and Address of FHCB :
Name of the FHCB Evaluation Team :
FHCB Assignment Letter :
Type of Field Evaluation :
Evaluation Implementation Date :
Member of the BPJPH Assessment Team :
BPJPH Assessment Team Assignment Letter :
Date of Witnessing :
Witness Results

1. **General Description** *(filled in by the foreign halal certification body)*

FHCB's Audit Type*) *Initials of Certification Organization* *Certification/Extension/Recertification* *Inspection Agency: Field/Product/Material*	
Audit Scope	
Relevant Standard Requirements (*SNI, Standards and/or Regulations*)	
Related FHCB documents (*Example: Procedure, Scheme, Agenda, Application Review, Auditor CV, etc*.)	
FHCB Client	
FHCB Client Address	
FHCB Client Institutional Description (*describe the organization's business processes, size and structure of the organization, history of the organization, multi- location information if relevant, etc.)*	

2. **Audit Activity Plan by FHCB to Clients**

a. **Assessment to determine whether the proposed evaluation scope is appropriate for the FHCB client's business processes and products**

Describe the process for determining the conformity of the proposed evaluation scope with the client's business process or product to be evaluated. (filled in by the certification body)
Assessor Verification:

b. Fulfillment of Auditor team competency requirements

Describe the requirements or qualifications of the team, the number of man- days and the process for appointing the evaluator team. Describe the experience, training and educational background of the appointed team. *(filled in by the certification body)*
Assessor Verification:

c. Type and/or methodology, and general information about the audit witnessed

Description of the type and/or methodology or mechanism of evaluation to be carried out, general information regarding (but not limited to) the location of the evaluation if multi-location, and other information related to the certification activities to be carried out *(filled in by the certification body)*
Assessor Verification:

d. Completeness of documents and/or audit equipment

Explain the supporting documents and/or equipment needed/used by the auditor team in carrying out product evaluation. *(filled in by the certification body)*
Assessor Verification:

3. Implementation of Audits by FHCB to Clients

a. Competence of the Auditor team in carrying out evaluations

Technical capabilities, understanding of relevant standards and related technical requirements, ability and thoroughness of the auditor team in observing the implementation of FHCB client evaluations, ethical capabilities and evaluation code of ethics
Assessor Verification:
The auditor team's ability to use evaluation Instruments (if relevant) (Equipment conformity and compliance with standard requirements, calibration status, equipment maintenance, and adequacy of the equipment instruction manual)

b. Method of submitting field evaluation plans by the auditor team

Did the auditor explain the evaluation plan in detail at the opening meeting? *Did the party being evaluated agree with the plan?*
Assessor Verification:

c. Communication

How did the teams communicate with each other, clients, and FHCB?
Assessor Verification:

d. Conformity of implementation with established plans

How well did the implementation match the plans? How timely was the implementation?
Assessor Verification:

e. Evaluation Methods/Techniques

Evaluation methods/techniques: *Did the auditor team use evaluation techniques, including appropriate interview techniques, to gather objective evidence that the production process is suitable for producing products that meet the requirements of the products referred to? If relevant, was the recording of samples suitable?*
Assessor Verification:

f. The ability of the auditor team to write down the conformity and nonconformity of evaluation results.

Did the auditor team note the conformity and/or nonconformity of the evaluation results, based on the objective evidence gathered during the evaluation?
Assessor Verification:

g. The ability of the auditor team to convey the results of the evaluation

Did the auditor team clearly communicate the conformity and/or nonconformity of the evaluation results to the party being evaluated, and provide clarification on their questions and requests for explanation?
Assessor Verification:
Did the audited party approve the auditor team's evaluation report at the closing meeting?

Assessor Verification:

h. Controlling recording of evaluation results

How did the auditor team ensure that they completed the evaluation results accurately and in accordance with established procedures, including the use of a checklist (if specified)? How did they control recordings?
Assessor Verification:

i. Conformity of the evaluation report with the implementation of the evaluation

Did the evaluation report describe the evaluation process in its entirety and provide evidence that it meets all relevant standard requirements?
Assessor Verification:

4. Conclusion of the Witnessing Process

a. Overall assessment of compliance with evaluation requirements

b. Overall assessment of the auditor team's competence

c. Summary of discrepancies and observations (if any)]

Place, Date

BPJPH assessor,

(Signature)

8.1 EVALUATION OF ACCREDITATION PROCESS RESULTS AND/OR CONFORMITY ASSESSMENT OF FOREIGN HALAL CERTIFICATION BODY

I. APPLICANT DATA

a. FHCB Name :
b. FHCB Address :
c. Team approval date from FHCB :
d. Type of Assessment :
e. Scope :
f. Adequacy audit completion date :
g. Accreditation History
Pre/Early Assessment :
Reaccreditation 1 :
Reaccreditation 2
:

II. IMPLEMENTATION OF THE ASSESSMENT

a. Assessment Date :
b. Assessment Team
- Team Leader :
- Team Members :
- Observer :

c. Nonconformity Findings
- Major/Category 1*) :
- Minor/Category 2 *) :
- Observation *) :

d. Final Completion Target of Corrective Action :
e. Final Completion Date of Corrective Action :
f. Final Verification Date of Corrective Action :

III. SUMMARY OF ASSESSMENT RESULTS

(Attached is verification of the corrective actions from the assessor)

1. (FHCB Name) has implemented a management system (referenced standard) with a commitment to fulfill/not fulfill requirements.
2. Number of personnel: [number] people with competencies that [meet/don't meet] requirements.
3. Evaluation resources (testing laboratories) used: [list of resources]
4. Fulfillment of organizational structure requirements: [meets/don't meet].
5. Information regarding the number of certificates that have been issued: [number].
6. Implementation of internal audits and management reviews: [meets/don't meet]
7. Fulfillment of assessment witness requirements: [meets/don't meet].
8. Evaluation of 1 (one) accreditation cycle (for re-accreditation): [meets/does not meet].

Conclusion of the assessment team:

1. Fulfillment of standard requirements and BPJPH accreditation criteria: meets/don't meet.
2. Recommendation for accreditation status: recommended/not recommended/prolonged.
3. Recommended scope: according to request/with changes*)
   *) if there are changes
4. Revised scope:
5. Scope not given: .....

Notes from the Assessment Team regarding the Assessment Result

Date : .....

Accreditation Implementation Team

.....

Information:

*) Select one

8.2 ASSESSMENT RESULTS CHECK REPORT

I. TECHNICAL COMMITTEE MEETING/EVALUATION

FHCB Name :

Day, Date :

Chairman of the Meeting :

Evaluating Team Members:

II. TECHNICAL CONSIDERATIONS

No.	Consideration	Evaluation result	
		Fulfil / No	Analysis Results
1	A series of Accreditation and/or Conformity Assessment processes for Foreign Halal Certification Body carried out in accordance with the scheme requirements including the implementation of witnesses		
	a. Audit documents and records		
	b. Assessment Process		
	c. Adequacy of sampling location, scope, resources assessed (e.g. Witness, multisite)		
	d. Completeness of the assessment report		
	e. Fulfillment of noncompliance follow-up		

2	FHCB's ability to fulfill accreditation requirements		
	a. Resource		
	b. Management		
	c. Process		
	d. Etc.		
3	Conformity of the requested, processed and recommended scope by the assessment team		

III. CONCLUSION OF TECHNICAL CONSIDERATIONS

The assessment team recommends:

- *Continuation of the MRA Cooperation in accordance with the assessment team's conclusions and the signing of the MRA.*
- *Continuation of the MRA Cooperation with notes and reasons, and the signing of the MRA after fulfilling the notes.*
- *Discontinuation of the MRA Cooperation for reasons*

  …

……, ……

Assessment Team Committee

……

ACCREDITATION DECISIONS AND/OR CONFORMITY ASSESSMENT OF FOREIGN HALAL CERTIFICATION BODIES

I. RECOMMENDATIONS FROM THE HEAD OF BPJPH/EXECUTIVE BOARD

	Conformity	
	Meets the requirements	Does not meet the requirements
Summary of Assessment Results	V	
Assessment Team Considerations	V	

Date:

Head of BPJPH/Executive Board

II. RESPONSE OF THE HEAD OF BPJPH/EXECUTIVE BOARD

Check the appropriate box

☐ Granted MRA Cooperation

☐ Not granted MRA Cooperation

ASSESSMENT REPORT OF
FOREIGN HALAL CERTIFICATION BODY

Foreign Halal Certification Body: [Write down the name of the Foreign Halal Certification Body/Agency]

Type of Assessment: [Write down the type of assessment] Assessment Date: [Write down the assessment date]

Assessment Team: [List the names of the assessment team members]

NOTE
Before the field assessment is conducted, the Foreign Halal Certification Body must conduct an independent evaluation (using this document as a basis) and fill in the required information in the space provided.

I. GENERAL INFORMATION

Name of the Foreign Halal Certification Body	:	*(filled by the Foreign Halal Certification Body) filled in by the FHCB*
Address	:	
Telephone/email	:	
Name of Contact Person	:	
Position of Contact Person	:	
Telephone/Email	:	
Background	:	*(Write down the general profile of the Foreign Halal Certification Body)*
Standard Reference	:	1. Law of The republic of Indonesia Number 33 of 2014 on Halal Product Assurance; 2. Law of The Republic of Indonesia Number 6 of 2023 on Stipulation of Government Regulations in Lieu of Law of The Republic Indonesia Number 2 of 2022 concerning Job Creation; 3. Government Regulation of The Republic of Indonesia Number 39 of 2021 on Implementation Law of The Republic of Indonesia Number 33 of 2014 on Halal Product Assurance;

		4. Ministerial Regulation of Religious Affairs of the Republic of Indonesia Number 26 of 2019 on Implementation of Halal Product Assurance; 5. Ministerial Regulation of Religious Affairs of the Republic of Indonesia Number 12 of 2021 on Halal Certification Body Assessment Team; 6. Ministerial Regulation of Religious Affairs of the Republic of Indonesia Number 2 of 2022 on International Cooperation for Halal Product Assurance; 7. Ministerial decree of Religious Affairs of the Republic of Indonesia Number 748 of 2021 on Products Type that Must Be Halal Certified; 8. Ministerial decree of Religious Affairs of the Republic of Indonesia Number 1360 of 2021 on Products Type Excluded from Halal Certified; 9. Head of Halal Product Assurance Organizing Agency Decree Number 20 of 2023 on Amendment to Head of Halal Product Assurance Organizing Agency Decree Number 57 of 2021 on Halal Product Assurance System Criteria; 10. SNI ISO/IEC 17065:2012 Requirements for agencies certifying products, processes and services; 11. SNI 99002:2016 Halal Slaughtering of Poultry; 12. SNI 99003:2018 Halal slaughtering on ruminant; 13. SNI ISO/TS 20224 - 3 2020 Molecular biomarker analysis — Detection of animal-derived materials in foodstuffs and feedstuffs by real-time PCR — Part 3: Porcine DNA detection method; 14. SNI 99004:2021 General Requirements of Halal Food; 15. Other related standards/criteria/guidelines in accordance with statutory provisions.

How to fill out assessor verification:

1. If the onsite results show that FHCB has implemented the requirements, write ‘’comply”.
2. If the onsite results show that the FHCB does not fully meet the requirements, write it as noncompliant by writing the nonconformity number according to the LKS form.
3. The assessor can add information that is deemed necessary to the report.

II. INFORMATION ON PREVIOUS ASSESSMENT RESULTS (FILLED IN BY FHCB)

Clause	Initial Accreditation and/or Mutual Recognition and Acceptance (Number of findings)	Surveillance	Witness	Re	
4.1	V	V	V	V	
4.2					

Assessment process notes: (filled in by the Secretariat)

1. Accreditation Decision and/or Mutual Recognition and Mutual Acceptance:
2. Previous assessment results:

III. INFORMATION REGARDING FULFILLMENT OF ACCREDITATION REQUIREMENTS AND/OR MUTUAL RECOGNITION AND ACCEPTANCE

A. Fulfillment of general requirements:

1. Legal and Contractual Issues (4.1)

a. Proof of the legality of the Foreign Halal Certification Body (FHCB)

Explanation by the FHCB: *(filled in by the FHCB)*

Description of the legal basis of the institution by attaching documents related to the legal basis and legal operational basis of the Foreign Halal Certification Body.

Assessor Verification:

Instructions for Foreign Halal Certification Body (FHCB)

- *Explain how the FHCB implements Clause 4.1.1. by attaching reference related to FHCB's documents or procedures.*
- *Attach documents related to the legality of FHCB's establishment and operations.*

b. Inspection Agreement

Explanation by FHCB: Explain the FHCB's mechanism for creating a legally binding inspection agreement with applicants.
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 4.1.2 and reference related FHCB documents or procedures.*
- *Attach documents/examples of inspection agreements.*

2. Impartiality Management (4.2)

Explanation by FHCB related to the implementation of Clause 4.2. by including: • *Structures, policies and procedures related to impartiality management*

- *Evidence of identification, analysis and follow-up on risks of impartiality, including but not limited to personnel, committees, FHCB operations, other activities within the same legal entity as the FHCB, and activities of other legal entities that are related with the FHCB;*
- *Form related to commitment to impartiality from FHCB personnel.*

Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 4.2 and reference related FHCB documents or procedures.*
- *Attach proof of identification and risk analysis of impartiality as well as a form related to the commitment to impartiality from FHCB's personnel.*

3. Liability and Finance (4.3)

a. Accountability Mechanism

Explanation by FHCB:

Describe the regulations related to accountability mechanisms and how the FHCB's financial arrangements are related to accountability.

Provide proof of liability arrangements, such as an insurance policy, deposit, or checking account.

Assessor Verification:

Instructions for FHCB

- *Explain how the FHCB implements Clause 4.3.1.and reference any relevant FHCB documents or procedures.*
- *Attach evidence regarding financial arrangements related to accountability.*

b. Financial Arrangements

Explanation by FHCB: • *Sources of FHCB's Finance and arrangements related to FHCB finance*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 4.3.2 and reference related FHCB documents or procedures.*

4. Nondiscrimination conditions (4.4)

Explanation by FHCB: • *Explain the requirements for submitting an inspection, particularly related to the party who can access inspection services, and how FHCB regulates accepting/rejecting an inspection request.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 4.3.2 and reference related FHCB documents or procedures.*

5. Confidentiality (4.5)

Explanation by FHCB: • *What are FHCB's legally binding arrangements for managing information obtained from or about clients and information created during the implementation of audit activities? (Attach examples/evidence of such legally binding arrangements.) What are the regulations regarding the provision of this information to parties other than the certification body and clients?*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 4.3.2 and reference related FHCB documents or procedures.*

6. Public Information (4.6)

Explanation by FHCB: *How can the public obtain information about the inspection services? Explain the media used for this purpose (e.g., website, brochure, other information media). What information is available to the public, either with or without request? If the printing media is used, please attach an example.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation of FHCB in relation to clause 4.3.2 and reference related FHCB documents or procedures.*

B. FULFILLMENT OF STRUCTURAL REQUIREMENTS

1. Organizational Structure and Top Management (5.1)

Explanation by FHCB: • *What is the organizational structure of the Foreign Halal Certification Body (FHCB)? What are the duties, functions, and responsibilities of each board, committee, or person involved in audit activities? (Please provide an attachment if possible.) What is the relationship between the FHCB's organizational structure and the larger organizational structure (if any)?*

• *Describe the formal mechanisms/rules for the appointment, terms of reference and operation of each committee involved in the audit process.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 5.1 and reference related FHCB documents or procedures.*
- *Attach an organizational structure diagram along with their respective duties and functions (see clause 5.1.3).*

2. Mechanisms to Maintain Impartiality (5.2)

Explanation by FHCB: • *Explain the mechanisms for maintaining FHCB's impartiality (e.g. through committees or other mechanisms).* • *What is the working frame of reference for this mechanism in providing input to FHCB, including the rights and obligations of this impartiality mechanism?* • *Who are the people involved in the impartiality mechanism and how are interested parties involved in the impartiality mechanism?*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 5.2 and reference related FHCB documents or procedures.*

C. FULFILLMENT OF RESOURCE REQUIREMENTS

1. Human Resources/Personnel of FHCB (6.1)

Explanation by FHCB: • *State the number of each personnel involved in FHCB activities both in managerial and inspection process related activities, both permanent personnel and subcontracted personnel.* • *Explain the existing competency management mechanisms at FHCB (can use attachments) starting from determining competency criteria, evaluating and determining competency, training and monitoring personnel performance.* • *Explain the mechanism for maintaining records of personnel involved in the inspection process as well as what information is maintained by FHCB including the contract mechanism with personnel.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 6.1 and reference related FHCB documents or procedures.*

- *Attach an organizational structure diagram along with their respective duties and functions (see clause 5.1.3)*

2. Internal Evaluation Resources (Testing Laboratories) (6.2.1)

Explanation by FHCB: • *Explain what evaluation (testing) activities in FHCB are carried out by internal resources.* • *Explain the evaluation mechanism for internal resources or other resources under FHCB's direct control that are used in the evaluation process, so that they always comply with applicable requirements and other documents stipulated in the inspection scheme.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 6.2.1 and reference related FHCB documents or procedures.*

3. External Evaluation Resources (Testing Laboratories) (6.2.2)

Explanation by FHCB: • *State the types and/or stages of evaluation activities in the inspection process that are outsourced by FHCB.*

• *Explain the FHCB requirements for institutions carrying out outsourcing activities. Includes technical and legal requirements (contract).* • *Explain the FHCB mechanism in ensuring the institutional fulfillment of the requirements to carry out activities outsourced by FHCB. The mechanisms include initial evaluation, performance evaluation, and corrective action.* • *Explain FHCB's mechanism for informing clients about outsourced activities, and the mechanism if clients raise objections regarding outsourced activities.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 6.2.1 and reference related FHCB documents or procedures.*
- *Attach contract documents/forms with the outsourcing agency and a list of approved subcontract service providers.*
- *Attach a list of external evaluation resources that FHCB has approved.*

D. FULFILLMENT OF PROCESS REQUIREMENTS

1. Operated Inspection Scheme (7.1)

Explanation by FHCB:

• *State the entire inspection scheme operated by FHCB including product requirements and other requirements related to the inspection process as well as references in standards or other normative documents (can use attachments).* • *Explain the FHCB mechanism in formulating explanations regarding certain inspection schemes operated by the FHCB.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7.1 and reference related FHCB documents or procedures.*
- *Attach FPA 03-b.05 form of evaluation scope and resources that have been completely filled out.*

2. Evaluation Activities (7.4)

Explanation by FHCB:

Explain the FHCB mechanism in ensuring:

- *Availability of all information and/or documentation needed to carry out evaluation tasks;*
- *Making a comprehensive evaluation plan for each product to be inspected;*
- *Assignment of personnel to each evaluation task performed with internal resources;*
- *Implementation of evaluation activities carried out by both internal and external resources in accordance with the evaluation planning that has been carried out;*
- *Information of all nonconformities found during the evaluation process and arrangements regarding additional evaluation tasks required (if applicable) to verify nonconformities if the client decides to continue the inspection;*
- *Documentation of all evaluation activities before the review is carried out.*

Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7.4 and reference related FHCB documents or procedures.*

3. Examination Overview (7.5)

Explanation by FHCB: • *Explain the FHCB mechanism for reviewing all information and results from evaluation activities, as well as the mechanism for providing recommendations to the Sharia Board regarding inspection decisions (if the review and decision are carried out by different people/committees) regarding halal determination.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7.5 and reference related FHCB documents or procedures.*

4. Inspected Product Directory (7.8)

Explanation by FHCB: • *Explain the mechanism for maintaining the product directory checked by FHCB as well as the mechanism provided that there is any part of the information that, based on the scheme requirements, must be made public either with or without a request.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7. and reference related FHCB documents or procedures.*
- *For Surveillance and Reaccreditation activities, please attach a list of clients /list of products inspected.*

5. Changes affecting inspections (7.10)

Explanation by FHCB: • *Explain the FHCB mechanism for informing and verifying clients provided that there are changes to product requirements or changes to the inspection scheme that affect the client's ability to fulfill inspection requirements.* • *Explain the mechanism by which FHCB obtains information and verifies clients if changes are made by the client that could affect the client's ability to fulfill inspection requirements.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7. and reference related FHCB documents or procedures.*

6. Inspection Records (7.12)

Explanation by FHCB: *Identify any records related to the inspection process for products, processes and services maintained by FHCB, their storage mechanisms, distribution mechanisms, the storage period for these records and the personnel responsible for inspection records.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7.12 and reference related FHCB documents or procedures.*

7. Complaints and Appeals (7.13)

Explanation by FHCB: *Explain the mechanism for submitting complaints and appeals related to the examination process and how the FHCB procedures process, validate, follow up on complaints and appeals submitted by applicants as well as who is responsible for the complaint and appeal process and decisions.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 7.13 and reference related FHCB documents or procedures.*

- *For Surveillance and Reaccreditation assessment activities, please attach the number of complaints and appeals that have occurred since the last visit.*

E. FULFILLMENT OF MANAGEMENT SYSTEM REQUIREMENTS

OPTION A - General Management System

1. General Management System Documentation (8.2)

Explanation by FHCB: *Explain the FHCB mechanism for determining, documenting and ensuring implementation at all levels of the FHCB institution regarding policies and targets in order to fulfill this standard. These mechanisms include:* • *Top management commitment* • *Personnel responsible for ensuring management systems whoare established, implemented and maintained* • *Ensuring that the entire FHCB management system always includes, refers to and meets the requirements of the SNI ISO/IEC 17065 standard* • *FHCB personnel access to the FHCB management system.*
Assessor Verification:

2. Document Control (8.3)

Explanation by FHCB: *Explain the document control system in FHCB, which regulates mechanisms for approval, review, updating, amendment and revocation of documents and ensures that documents used by each function are always relevant, legible, identified, controlled.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 8.3 and reference related FHCB documents or procedures.*

3. **Record Control (8.4)**

Explanation by FHCB: *Explain record control procedures in FHCB, which include arrangements for identification, storage, protection, retrieval, retention period and disposal of records in accordance with FHCB requirements, contract requirements and applicable regulations.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 8.4 and reference related FHCB documents or procedures.*

4. **Management Overview (8.5)**

Explanation by FHCB: *Explain the mechanism for implementing the FHCB management review, which includes regulations regarding implementation procedures, implementation time span, input for management review and management review output.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 8.5 and reference related to FHCB documents or procedures*

5. **Internal Audit (8.6)**

Explanation by FHCB: *Explain the FHCB internal audit mechanism, which includes regulations regarding the internal audit program, internal audit time span, personnel who carry out internal audits and internal audit follow-up.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 8.6 and reference related to FHCB documents or procedures.*

6. Corrective Action (8.7)

Explanation by FHCB: *Explain the FHCB mechanism for taking corrective action related to nonconformities that occur in FHCB operations.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 8.7 and reference related FHCB documents or procedures*

7. Precautions (8.8)

Explanation by FHCB: *Explain the FHCB mechanism for taking preventive action against the risk of nonconformities in FHCB operations.*
Assessor Verification:

Instructions for FHCB

- *Explain the implementation in FHCB regarding clause 8.8 and reference related FHCB documents or procedures.*

OPTION B – Management System based on ISO 9001

CONCLUSION OF ASSESSMENT/ OBSERVATION/RE-ASSESSMENT.

ATTACHMENTS

1. Checklist
2. Reference List (daftar pustaka)
3. Concise Report and Non-Conformity Sheet
4. Attendance Record (Opening and Closing of the Meeting)
5. Non-conformity Verification Report

……,……

Reported by

Lead Assessor

……

FHCB VERIFICATION AND VALIDATION INSTRUMENTS *)

Name of the FHCB : _____

Office Address : _____

Telephone/Fax : _____

FHCB Classification : _____

Scope of Activities : _____

Laboratory Ownership : Institutional Ownership/Joined Ownership **)

Laboratory Status : Accredited/Not Accredited **)

Inspection and/or Testing Competency

Products	Services

Number of FHCB employees : person
Managerial personnel : person
HR personnel in Sharia Law : person
Halal auditors : person
Laboratory personnel : person
Administration personnel : person
Others (please specify) : person

Managerial Personnel

No.		Name	Position
1.			
2.			
3.			

4.			

HR Personnel in Sharia Law

NO	Name	Education	Experience
1.			
2.			

Halal Auditor Personnel

NO	Name	Education	Availability of Competence Certificate (Yes/No)**) Attach if any	Availability of Training Certificate (Yes/No)**) Attach if any
1.				
2.				
3.				

FHCB Requirements Fulfillment Policy

No	Description	Yes	No	Information
1.	Does FHCB have the following requirements:	If yes, please provide the documentary evidence		
	a. Own office and equipment?			
	b. Have at least 3 halal auditors?			
	c. Have at least 3 Sharia Council members?			
	d. Have laboratory or cooperation agreement with other institutions that own laboratory?			

2.	Does FHCB have the following supporting documents:	If yes, please provide the following documentary evidence		
	a. Legal entity legal documents?			
	b. Human resources data in the field of Islamic law?			
	c. Supporting data on resource competency?			

Document Fulfillment Requirements Policy

No	Description	Yes	No	Description
	Document requirements:			
1.	Legal documents			
	a. Application letter for accreditation and/or mutual recognition and acceptance			
	b. Bills of tax, water, and electricity, photos of FHCB offices and rooms			
	c. Business licence			

Report on the results of verification and validation of FHCB candidates ..... are as follows

ASSESSMENT QUESTIONNAIRE

FOR FOREIGN HALAL CERTIFICATION BODIES

Name of Organization :

Address :

Telephone/Fax/Email :

Contact Person :

A. INFORMATION REGARDING THE ORGANIZATION

NO	QUESTIONNAI RE	RESULTS	NOTE
1.	What is the status of your organization? Is it founded by the government or by an Islamic religious organization? Please explain and include evidence.		

2.	What is the structure of the organization and the management arrangements?		
3.	Does your institution have Sharia board? If so, what are their roles and qualifications? Please include the list of Ulama, together with their respective curriculum vitae.		
4.	Does the organization possess Halal Auditors? If so, what are their duties and qualifications? Please include data on the auditors and their respective curriculum vitae.		
5.	What is the administration and documentation system in your organization?		

6.	Please provide data on the company and products that have been certified by your organization.		
7.	Does the organization recognize Kosher Certificate? Please explain.		
8.	How does the organization recognize a halal certificate? Please enclose the list of halal certifier agencies approved by your Organization.		

B. AUDIT/INSPECTION PROCEDURE

NO	QUESTIONNAIRE	RESULTS	NOTE
1.	How does the organization have a halal certification scheme? Explain the certification process from the initial application until the issuance of a halal certificate. Please include copies of the forms used at each stage of the process plus an example of the halal certificate issued.		
2.	Is this process in the form of written Standard Operational Procedures (SOP)? If so, please include the required documents.		
3.	Is an audit of documents conducted in this inspection process? If so, when is the audit conducted, and which documents are audited?		

4.	Are audits conducted at the manufacturer? If so, please explain the detailed procedure.		
5.	How does the audit system work in pandemic situation? please explain the detailed procedure.		
6.	Does the organization have Halal standards?		

C. LABORATORY

NO	QUESTIONNAIRE	RESULTS	NOTE
1.	Does the organization have laboratories accredited for halal product analysis? If so, please explain the type of analysis that can be done.		
2	Does the organization collaborate with laboratories accredited for halal product analysis? If so, please explain in detail.		
3	Is laboratory analysis conducted at each inspection? If so, what type of analysis is normally conducted? Which laboratory can conduct the analysis?		

D. CERTIFICATION

NO	QUESTIONNAIRE	RESULTS	NOTE
1.	What is the certification procedure for food and drink? Please explain in detail.		
2	Who is in charge of determining the halal status of the products audited?		
3	When the halal status certificate can be issued?		
4	Who issues the halal certificates?		
5	For how long is the Halal certificate valid?		
6	What is the procedure for its renewal?		
7	What is the observation procedure for companies possessing a halal certificate to ensure the continuity of the halal product process?		

8.	What is the procedure if the company wants to register a new product, or use new material in a halal-certified product?		
9.	What is the certification procedure for restaurant, catering/food service? Please explain in detail.		
10	If the applicant is an exporter/distributor, and not the manufacturer, how is the certification procedure?		
11	What is the certification procedure for slaughterhouse/poultry? Please explain in detail.		
12	What is the certification procedure for pharmaceutical and cosmetic products? Please explain in detail.		

13	What is the certification procedure for biology, chemical, and Genetically Modified Organism (GMO) products? Please explain in detail.		
14	What is the certification procedure for used products? Please explain in detail.		
15	What is the certification procedure for service products (processing, packaging, storing, distributing, selling, serving)? Please explain in detail.		

ASSESSMENT QUESTIONNAIRE

FOREIGN HALAL CERTIFICATION BODIES HALAL PRODUCT ASSURANCE SYSTEM

Name of Organization :
Address :
Telephone/Fax/Email :
Contact Person :

NO	QUESTIONNAIRE	RESULTS	NOTE
A.	**COMMITMENT AND RESPONSIBILITY**		
1.	Does the company that applied for halal certification have the following: ● Halal policy? ● Halal management team or Halal supervisor?		
2.	Does the company that applies for halal certification have the following: ● Muslim supervisor? ● A certificate of training completion and/or certificate of competency?		
3.	Does the company applying for halal certification conduct the Development of Human Resources both internally and externally?		

B.	MATERIALS		
1.	Are there any material provisions in the production process, such as: ● Raw materials? ● Additive substances? ● Auxiliary materials? ● Packaging? ● Cleaning agent?		
2.	Are there any material provisions that must not be derived from: ● Pigs and derivatives ● Blood ● Carcass ● Human body parts ● Alcohol ● Alcohol by-product ● Fanged animals and sharp nails ● Protected animals		
3.	Are there any material provisions that must not be produced from production facilities used to make products derived from pork or haram materials?		
4.	Is there a requirement that material provisions from Halal animals must be slaughtered according to Islamic law and meet veterinary public health requirements?		

5.	What are the provisions for alcohol-containing products?		
6.	What are the provisions for the use of microbes?		
7.	If the company produces Halal and Haram products of the same type of products or uses both Halal and Haram materials as materials of the same type, how do you ensure that no cross-contamination occurs?		
8.	Does the company have supporting documents for materials? if so, please explain in detail.		
C.	**HALAL PRODUCT PROCESS**		
1.	Are there provisions related to the separation of locations, places and equipment for Halal and non-Halal products?		
2.	**Specifically, for slaughter** ***a. Location:*** ● Separate the slaughter location for Halal and non-Halal products ● Separate them with a wall fence of at least 3 meters' high ● Separate waste handling facilities for halal and non-Halal products		
	b. Places:		

	Does the company separate halal and non-Halal slaughtering places, including: ● Animal shelter ● Slaughter area ● Skinning area ● Evisceration area ● Withering room ● Chilling room ● Carcass handling area ● Waste handling facilities		
	c. Tools: Do the slaughtering equipment for Halal and non-Halal products: • Have not been used interchangeably? ● Use different facilities for storage, tools maintenance and storage?		
3.	d. Does the company carry out the stunning process? If so, please explain in detail.		
4.	**Place and processing equipment** a. Place: Does the company separate processing places between halal and non-Halal products, including: ● Ingredients storing		

	• Ingredients weighing • Ingredients mixing • Ingredients molding • Product cooking • Other processes that affect product manufacturing		
	b. Tools: Does the company separate equipment between halal and non-Halal products, including: • Not using tools interchangeably. • Using different facilities for cleaning, maintaining and storing equipment.		
5.	**Storage areas and tools** a. Place: Does the company separate storage areas between halal and non-Halal products, including: • Materials receiving area • Post-processing receiving area • Facilities used for storing materials and products, tool maintenance and storage.		
	b. Tools:		

	Does the company separate storage equipment between halal and non-Halal products, including: ● Not using tools interchangeably ● Using different facilities of storage equipment for halal and non-halal in cleaning, maintaining and storing packaging tools		
6.	**Area and tools for packaging** a. Does the company separate area and equipment for packaging between halal and non-Halal products, including: ● Packaging materials ● Packaging facility		
	b. Does the company separate equipment for packaging between halal and non-Halal products, including: ● Not using packaging equipment interchangeably ● Using different facilities between halal and haram in cleaning, maintaining, and storing packaging equipment		
7	**Distribution places and tools** a. Place: Does the company separate distribution places for halal and non-Halal products, including:		

	• Transportation facility from storage to product distribution vehicle • Transportation vehicle for product distribution		
	b. Tools: Does the company separate distribution equipment between halal and non-Halal products, including: • Not using distribution equipment interchangeably. • Using different facilities for cleaning, maintaining, and storing distribution equipment.		
8	**Places and tools of sales** a. Does the company separate places and equipment of sales between halal and non-Halal products, including: • Facility of product sales • Process of product sales		
	b. Does the company separate sales equipment between halal and non-Halal products, including: • Not using sales equipment interchangeably. • Using different facilities for cleaning, maintaining, and storing sales equipment.		

9	**Serving places and tools** Does the company separate serving places and equipment between halal and non-Halal products? • Product presentation facilities • Product presentation process.		
	Does the company separate serving tools between halal and non-Halal products? • Not using serving equipment interchangeably. • Using different facilities for cleaning, maintaining, and storing serving equipment.		
10	How are the provisions regarding the distribution, sale, and serving of Halal fresh animal products?		
11	If the company produces halal and non-Halal products of the same type or uses both halal and non-Halal materials as materials of the same type, how do you ensure that no cross-contamination occurs?		
12	How far do you trace back the halal product process of each material used in the halal product?		

13	What is your opinion on the use of shared use facilities?		
D.	**PRODUCT**		
1	How does the company guarantee that certified products conform to Sharia law? Please explain.		
2.	How does the company guarantee that certified products are safe for consumption?		
3	Can products in the shape of pigs and dogs, and with erotic/vulgar/pornographic packaging be submitted for certification?		
4	Can products with names contradict to Islamic law be certified?		
5	What are the provisions related to packaging materials, such as the use of halal materials, designs, signs, symbols, logos, and names, according to the provisions of Islamic law?		
6	Is the inclusion of a halal label conducted after the issuance of halal certification? Please explain.		
7	What are the provisions if a certified product does not meet the halal criteria?		
E.	**MONITORING AND EVALUATION**		

1	What is the monitoring and evaluation procedure for the results of audits?		
2	Does the company conduct internal audits? If so, how many times in a year?		
3	Do the company conduct management reviews to evaluate the application of halal product assurance? Please explain.		
4	Does the company have internal audit procedures and management reviews in place? Please explain.		
5	Does the company report the results of internal audits to your organization?		

ASSESSMENT QUESTIONNAIRE FOREIGN HALAL

CERTIFICATION BODY
FIQH OPINIONS

Name of Organization :
Address :
Telephone No/Fax/Email :
Contact Person :

N0	DESCRIPTION	RESULTS			Comments /Action Required
		Yes	No	N/A	
A	**Institution**				
1.	Institutional status				
	a. Are institution established by the state?				
	b. Are Institutions formed by Islamic organizations?				
	c. Are institutions formed by companies?				
	d. Does the institution have support from Islamic community organizations?				
	1) Please provide official proof of support from Islamic organizations.				

	2) Is there support in the form of involvement of Islamic organizations in the halal certification process?				
	3) Do Islamic organizations participate in assisting, supervising, and monitoring halal certification?				
2.	Form of Institution				
	a. Is a government agency				
	b. Is a private company				
	1) Ltd. or Co, Ltd.				
	2) Inc (Incorporated)				
	3) Corp (Corporation)				
	4) MNC (Multinational Corporation)				
	5) Bhd. (Berhad) - Malaysia				
	6) Sdn. Bhd. (Sendirian Berhad) - Malaysia				
	7) Pte. Ltd. (Private Limited) - Singapore				
	8) LLC (Limited Liability Company) – United States of America				
3.	Is it an Islamic institution?				
	1) Mosque institution				
	2) Islamic social institutions				

	3) Islamic migrant agency				
	4) other Islamic institutions				
B.	**Infrastructure**				
1.	Is the institution's office permanent?				
2.	Is the institution's office owned?				
3.	Is the institution's office rented? If yes, how long?				
	a. < 1 year				
	b. 1 - 5 years				
	c. 6 - 10 years				
	d. 10-20 years				
C.	**Coooperation partners**				
1.	a. Does the institution ha cooperation with local halal certification body?				
	b. How long has the institution been working with the local halal certification body?				
	1) < 1 year				
	2) 1 - 5 years				
	3) 6 - 10 years				
	4) 10-20 years				
2.	a. Does the institution have a cooperation with foreign halal certification body?				

	b. How long has the institution been working with other country's halal certification body?				
	1) < 1 year				
	2) 1 - 5 years				
	3) 6 - 10 years				
	4) 10-20 years				
3.	Does the institution have a cooperation with the international halal institutional community?				
	Internal institution to follow				
	a. World Halal Food Council (WHFC)				
	b. World Halal Council Turkey				
	c. The World Halal Food Malaysia				
D.	**Fatwa Management**				
1.	Standard Operating Procedures (SOP) for determining halal product:				
	a. Audit report analysis				
	b. Sharia conformity analysis				
	c. Fatwa commission meeting				
	d. Determination of fatwa				
2.	Does the institution conduct good records of sharia conformity documents?				

	a. Application documents				
	b. Audit report				
	c. Auditee company data				
	d. Sharia HR documents/fatwa				
	e. Other documents				
E.	**Sharia compliance**				
1.	Does the institution have fatwa guidelines/standards?				
2.	Are the fatwa guidelines/standards developed by the institution itself?				
3.	Does the institution use and apply fatwa standards from other countries?				
4.	If so, which fatwa guidelines/standards from other countries are used and implemented?				
	a. MUI Fatwa Standards				
	b. JAKIM Fatwa Standards				
	c. MUIS Fatwa Standards				
	d. Other fatwa standards (please specify)				
5.	Do the fatwa guidelines/standards that are used and implemented contain the following?				
	a. Standardization of Halal Fatwa				
	b. Halal Food Fatwa Standards				
	c. Medicine and treatment Fatwa Standards				

	d. Halal Standards for Cosmetic Products and Their Use				
	e. Slaughter Fatwa Standards				
	f. Alcohol Fatwa Standards				
	g. Genetically Modified Organism (GMO) Fatwa Standards				
	h. Fatwa Standards on Animal Skin Tanning and Its Utilization				
	i. Use of Microbes and Microbial Products in Food Products Fatwa Standards				
	j. Other Fatwas				
6.	Does the Institution have its own halal determination madzhab?				
7.	The Institution is guided by and adheres to the general madzhab?				
	a. Imam Abu Hanifah				
	b. Imam Malik				
	c. Imam Syafi'i				
	d. Imam Ahmad bin Hanbal				
	e. Tanpa madzab				
	f. Imam.....				
F.	**HALAL FATWA**				
1.	Does the Institution have a fatwa board?				
2.	Does the institution have a fatwa board member?				
	a. < 2 members				

	b. 3-5 members				
	c. 6-10 members				
	d. 10-20 members				
3.	Does the institution have a fatwa board structure?				
4.	Does the institution select fatwa board members based on their sharia expertise?				
5.	Are fatwa board members also personnel from other institutions or agencies?				
6.	Do fatwa board members follow the slaughterhouse audit process to ensure that the slaughter process is compliant with sharia law?				
7.	If not, are there any other sharia personnel involved in the slaughterhouse audit process?				
8.	Does the institution have a decree or certificate that establishes the fatwa board according to sharia expertise?				
9.	Does the institution grant full authority to the fatwa council to determine halalness?				
10.	Does the institution involve a team of scientists and the fatwa board in determining halalness?				

11.	Does the institution grant full authority to the fatwa council to determine halalness?				
12.	Does the fatwa council have the opportunity to provide views and opinions regarding the halalness of products?				
13.	Does the institution only determine halalness based on the fatwa council's decision on product halalness?				
G.	**HALAL FATWA ISSUES**				
1.	The halal slaughter process involves draining the blood by cutting the food passage (mari'/esophagus), the respiratory tract/throat (*hulqum*/trachea), and two blood vessels (*wadajain*/jugular vein and carotids artery).				
2.	Is the use of stunning methods allowed in the slaughtering process?				
	a. Ruminants				
	b. Poultry				
3.	Is the use of haram and dangerous animals allowed?				

4.	Is the use of protected animals permitted?				
5.	Is the use of organs for medicine, cosmetics, chemicals, or food permitted?				
6.	Is it permissible for slaughtering to be conducted by non-Muslims?				

ASSESSMENT QUESTIONNAIRE FOREIGN HALAL

CERTIFICATION BODY

Name of Institution :
Address :
Telephone No/Fax/Email : Contact Person
:
Scope : Slaughtering

N0	Question	Indonesia Standard	Results		Comments /Action Required
	English	English	Yes	No	
1.	Does the institution have any specific standards for slaughtering? If so, please provide details.	Indonesian Standard for Halal Slaughtering: • SNI 99003 Halal Slaughtering on Ruminants • SNI 99002, Halal Slaughtering on Poultry, Halal Product Assurance System			

2.	Does the institution have a standard for the legality documents required for slaughterhouses?	Legality • Slaughterhouses must have a Business Identification Number (NIB) based on their risk level. • Slaughterhouses established by the government must provide legal documents from the government.			
3.	Does the institution have a standard that requires slaughterhouses to have a veterinarian on staff?	It is not required, but the institution is recommended to have a veterinarian.			
4.	Does the institution have a halal management team that comprises:	Halal Management Team: Halal Slaughterer:			

	• Halal Slaughterer • Halal Supervisor	• Muslim, minimum age of 18 years old, • Have a minimum of 2 (two) years of experience as a halal slaughterer • Have the ability to slaughter • Have a certificate of halal slaughtering training? Halal Supervisor • Muslim • Have a certificate of training and/or certificate of competence of halal supervisor • Have an understanding of the critical points of the halal slaughtering process • Have an understanding of Animal Welfare • Willing to be present at the location of the Halal Product Process			

5.	Does the institution have any specific requirements for slaughtering tools? If so, please provide details!	Slaughtering Tools • The Knife that is used to slaughter should be very sharp and comply with food grade standard. • The Size of the knife should be adjusted to the size of the animal's neck. • The Knife that is used to slaughter is not made from bone, claw (nail), horn, and tooth/fang. • All container equipment and surfaces that come into contact with meat and offal must be: made of non-wood and non-toxic materials, not easily corrosive (made of stainless steel or galvanized metal), made of food-safe or food-grade materials, easy to clean, easy to disinfect, easy to maintain			
6.	Does the institution have any specific requirements for the animals (livestock) that will be slaughtered?	Halal livestock requirements. Livestock must be: • Alive when slaughtered. • Meet animal health standards by provisions.			

		• Not fed pork or its derivatives. • Not fed modified elements of haram products that can cause changes in smell, taste, or be dangerous if consumed. • May be fed *najis* raw materials if only in small amounts or no more than pure raw materials;			
7.	What is your opinion about the requirement of the halal slaughtering process?	Slaughtering Process: • The animal must be slaughtered with the name of Allah (God). • Slaughter is performed by cutting the food tract (mari'/esophagus), respiratory tract (hulqum/trachea), and two blood vessels (wadajain/jugular vein and carotid artery) to drain the blood. • Slaughter is carried out swiftly and in one motion. • The act of slaughter causes the animal's death, which is indicated by the cessation of blood flow (cardiovascular system shutdown).			

8.	Does the institution have a requirement for stunning? If so, please explain!	If a stunning process is conducted prior to the non-stunning slaughtering, there is a requirement such as: • To own skilled employees to handle the livestock. • The method of handling livestock shall be conducted with regard to Animal Welfare			
		Pre-slaughter stunning: • Only electrical stunning and non-penetrative mechanical stunning are permitted. • For ruminants, only non-penetrative mechanical stunning and electrical stunning are permitted.			

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		• For poultry, only water bath electrical stunning is permitted. • Stunning must only cause temporary unconsciousness and must not cause damage to the skull that penetrates the brain if penetrative stunning is used • Stunning tools must be maintained in accordance with the manufacturer's instructions.			
9	How about the standard related to post slaughtering handling?	Post Slaughtering handling • Handling may be conducted after the animals have been confirmed dead. • Postmortem inspection must be conducted by authorized staff to ensure that the slaughtering product meets the requirements of *halalness* and wholesomeness. • Products from the slaughtering process that do not meet the requirements must be separated and receive special treatment to prevent them from entering the food chain. • Handling may be conducted after the animals have been confirmed dead. • Postmortem inspection must be conducted by authorized staff to ensure that the slaughtering product meets the requirements of *halalness* and wholesomeness.			

		• Products from the slaughtering process that do not meet the requirements must be separated and receive special treatment to prevent them from entering the food chain. • Documentation of product handling after slaughtering			

10	In case of conducting packaging process of the slaughtering products, what are the standards related to the packaging of the product?	Packaging of the slaughtering product. • The product must be packaged using a clean, food-safe, odorless package that does not affect the quality or safety of the product. • Packaging must be conducted in a clean and hygienic area.			
11	How about the product storage (by taking into account the business process)?	Product storage: • Halal storage facilities and infrastructure must be used to store halal slaughtered products • During the storage process, it must be ensured that there is no cross-contamination from unclean or non-halal products.			

12	How are the products being distributed?	Product Distribution (by taking into account the business process): • There must be a separation between transportation facilities for halal and non-halal products. • If a slaughterhouse does not own a transportation facility, products can be distributed using external transportation facilities, provided that there is an agreement between the slaughterhouse and the external party that the transportation facilities will only be used to distribute halal products. • A copy of the halal certificate can be included at places that sell products originating from halal certified slaughterhouses. • The halal label must be placed on the products' packaging, parts, and/or certain places on the products, in accordance with statutory provisions. • A copy of the halal certificate can be included at places that sell products originating from halal certified slaughterhouses.			

		• The halal label must be placed on the products' packaging, parts, and/or certain places on the products, in accordance with statutory provisions. • Organizations that do not carry out standard packaging must include documents regarding the halal status of the products released from the slaughterhouse. • It is necessary to ensure that the products produced are not packaged and are not contaminated by *najis*/uncleanness.			