



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

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**APPLICATION FORMS FOR DAIRY ESTABLISHMENT APPROVAL IN
COUNTRY WISHING TO EXPORT MILK PRODUCTS TO INDONESIA**

Note :

This guideline sets out the information on dairy establishment required by Directorate Veterinary Public Health, Directorate General of Livestock and Animal Health Services (DGLAHS), Ministry of Agriculture of Republic of Indonesia for evaluation to export milk products to Indonesia. Please include any additional information and photographs to support your application. Inadequate/incomplete submissions may result in delay in processing. All information submitted must be in English and in hard copy and soft copy.

Exporting Country: _____

A. GENERAL INFORMATION

1. Name of establishment : _____
2. Establishment No. : _____
3. Address : City/Village: _____
District : _____
Province/State/Prefecture: _____
GPS coordinate: _____
Phone : _____
Facsimile : _____
E-mail : _____
4. Address of headquarters (if different from establishments address):
: City/Village: _____

District : _____

Province/State/Prefecture: _____

GPS coordinate: _____

Phone : _____

Facsimile : _____

E-mail : _____

5. Contact person at establishment :

Name : _____

Position : _____

Telephone : _____

Facsimile : _____

E-mail : _____

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

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

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

9. Type of milk products are going to be exported:

10. Additional facilities found at establishment:

10.1 Production of milk products:

Yes No

10.2 Storage room for milk products:

Yes No

11. Describe the raw material used in this establishments: Raw Milk / Milk Products

12. If the raw material is raw milk, source of raw milk:

12.1 Import (country, farm registration number):

12.2 Domestic:

13.2.1 Owned by the company (farm registration number)

13.2.2 Others (farm registration number)

13. If the raw material is milk products, source of milk products:
 - 13.1 Import (country, establishment number):
 - 13.2 Domestic:
 - 13.2.1 Owned by the company (establishment number)
 - 13.2.2 Others (establishment number)

14. The products intended for:
 - Export
 - Domestic
 - Both

15. List the latest 3 (three) years production of milk products **Annex 1.**

16. In case of part or all of the products are intended for export
 - 16.1. List the names of importing countries and date of approval, types of exported products, volume and the first year of export and name of importing country: **Annex 2.**
 - 16.2. Date of the last 6 (six) months export and name of importing country: Please attach a copy of veterinary health certificate that accompanied the last shipment to each country): **Annex 3.**

17. Layout of Plant

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

B. Additional Information of Establishment

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

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

3. Medical Examination and History:

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

C. Location and Facilities of Establishment

1. Location

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

2. Facilities of establishment

- 2.1 Source of Water
- 2.1.1 Source of water used in the production of milk products:
- 2.1.2 Is the water source examined regularly by the external accredited laboratories?
- 2.1.3 What kind of laboratory examinations subjected to the water?
- 2.1.4 Please attach the latest of laboratory examination result
- 2.2 Source of Electricity
- 2.2.1 Describe the main source of electricity:
- 2.2.2 Describe the backup source of electricity:
- 2.3 Storage Facilities
- 2.3.1 For dry ingredients:
 Yes No
 If yes, the temperature _____°C and the relative humidity _____%
- 2.3.2 For chemicals, disinfectants and other cleaning agents:
 Yes No
 Please attach list of chemicals, disinfectants and other cleaning agents used. **Annex 6**
- 2.3.3 Chillers/refrigerators:
 Yes No

If yes, the temperature _____ °C and the relative humidity _____
%, Capacity: _____ ton

2.3.4 Cold storage:

Yes No

If yes, the temperature _____ °C and the relative humidity _____
%, Capacity: _____ ton

2.4 Waste treatment/disposal.

2.4.1 Describe the treatment of liquid waste including disposal (method, frequency, capacity)

2.4.2 Describe the treatment of solid waste including disposal (method, frequency, capacity)

2.4.3 If the disposal of waste using the third party, please attach the latest letter of contract. **Annex 7**

2.5 Location of mouse/mice trap

Attach copy of layout map of mouse/mice trap: **Annex 8**

2.6 Facilities for workers, attach information related to the quantity/room size/photo of: **Annex 9**

Staff canteen(s)

Toilets

Lockers

Changing rooms

Shower facilities

Hands-free operated features for taps and toilet flush

Disposable towels and hand disinfectants

D. Procces of Production

1. Give detail flowchart on production/processing of milk and milk products (from acceptance of raw material until finish products, including the application of temperature, time, air pressure, relative humidity and mesh size (if any) **Annex 10**

2. Indicate the control process (CP) and Critical Control Point (CCP) and or Operational Prerequisite Program (OPrP) in the flowchart and give them in detail in table **Annex 11**

E. Food Safety and Quality Assurance (applicable for milk products intended for human consumption)

1. The assurance system of food safety and quality applied in the establishment (choose one or more of the following answer):

1.1 Good Manufacturing Practice/ Good Hygiene Practices:

Yes No

If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 12**

1.2 Hazard Analysis Critical Control Point:

Yes No

If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex**

13

13 ISO 22000: 2018 Food Safety Management System

- Yes No

If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 14**

14 Food Safety System Certification (FSSC) 22000

- Yes No

If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 15**

15 Others: please attach the valid certificate and the latest report of internal audit including the fulfillment of corrective actions. **Annex 16**

2. Is there any food safety team in the establishment?

- Yes No

If yes, please attach the name of members and education or training background (certified or not certified). **Annex 17**

3. Describe the criteria of milk products which are rejected for consumption and how will the rejected milk products be handled:

Annex 18

4. State whether laboratory testing is done in the establishment or provided by an external accredited laboratory:

- In-house laboratory

Please describe the type of examination, and please attach the latest laboratory report for each product that will be exported. **Annex 19**

- External accredited laboratory

Please attach the latest laboratory report for each product that will be exported. **Annex 20**

5. State whether the calibration of measuring tools is done in the establishment or provided by an external accredited institution.

- In-house

Please describe the type of measuring tools which are calibrated

Is the person who carries out the calibration certified?

- Yes No

Please attach the certificate. **Annex 21**

- External accredited institution

Please describe the type of measuring tools which are calibrated.

Annex 22

6. Product recall and traceability system:

Please describe in detail product recall and the traceability system from raw material to finished products. **Annex 23**

7. Pest Control Program
- 7.1 Is the pest control program carried out by the management?
 Yes No
 If yes, please describe the pest control program. **Annex 24**
- 7.2 If the pest control program carried out by the third party,
 Please attach the letter of contract and the latest report of visit.
Annex 25
8. Cleaning and disinfection
- 8.1 How is cleaning and disinfection performed on floors and walls?
- 8.2 How is cleaning and disinfection performed on equipment which are
 contact with products?
- 8.3 How is cleaning and disinfection on equipment in contact with the
 rejected products?
- 8.4 How is cleaning and disinfection performed on milk tank?
9. Establishment monitoring program
- 9.1 Is there any regular control or supervision from government inspector or
 QC for the implementation of food safety program in the establishment?
 Yes No
- 9.2 Number of scheduled monitoring inspection per year: _____
(By Government inspectors or QC of the company)
10. Halal Assurance
- 10.1 Does the establishment apply the halal assurance system?
 Yes No
- 10.2 If yes, please mention the certification body that issues the halal
 certificate. Please attach the certificate. **Annex 26**

F. Quality Assurance (applicable for milk products not intended for human consumption)

1. The quality assurance system applied in the establishments: (choose one
 or more of the following answer):
- 1.1 Good Manufacturing Practice:
 Yes No
 If yes, please attach the valid certificate and the latest report of internal
 and/or external audit including the fulfillment of corrective actions.
Annex 12
- 1.2 Others:.....please attach the valid certificate and the latest report
 of internal audit including the fulfillment of corrective actions. **Annex 13**
2. Describe the criteria of milk products which are rejected for consumption and
 how will the rejected milk products be handled: **Annex 14**
3. State whether laboratory testing is done in the establishment or provided by an
 external accredited laboratory:
 In-house laboratory
 Please describe the type of examination, and please attach the latest

laboratory report for each product that will be exported. **Annex 15**

External accredited laboratory

Please attach the latest laboratory report for each product that will be exported. **Annex 16**

4. State whether the calibration of measuring tools is done in the establishment or provided by an external accredited institution.

In-house

Please describe the type of measuring tools which are calibrated

Is the person who carries out the calibration certified?

Yes No

Please attach the certificate. **Annex 17**

External accredited institution

Please describe the type of measuring tools which are calibrated. **Annex 18**

5. Product recall and traceability system:

Please describe in detail product recall and the traceability system from raw material to finished products. **Annex 19**

6. Pest Control Program

6.1 Is the pest control program carried out by the management?

Yes No

If yes, please describe the pest control program. **Annex 20**

6.2 If the pest control program carried out by the third party,

Please attach the letter of contract and the latest report of visit. **Annex 21**

7. Cleaning and disinfection

7.1 How is cleaning and disinfection performed on floors and walls?

7.2 How is cleaning and disinfection performed on equipment which are contact with products?

7.3 How is cleaning and disinfection on equipment in contact with the rejected products?

8. Establishment monitoring program

8.1 Is there any regular control or supervision from government inspector or QC for the implementation of quality assurance in the establishment?

Yes No

8.2 Number of scheduled monitoring inspection per year: _____
(By Government inspectors or QC of the company)

9. Halal Assurance

9.1 Does the establishment apply the halal assurance system?

Yes No

9.2 If yes, please mention the certification body that issues the halal certificate. Please attach the certificate. **Annex 22**

G. Declaration by Establishment:

I declare that information given above is true and correct.

Name, Signature* and Company Stamp

Date

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

H. Verification by Veterinary Authority:

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

Name, Signature* and Official Stamp
Of Veterinary Authority

Date

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