



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bohi Leaf**  
Address: 25-25 Parsons Blvd  
City: Flushing State: New York Zip: 11354  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**  
Describe soaking and salting process: **N/A**
5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **FKB Donuts of Hewlett**  
Address: 31 Franklin Ave  
City: Hewlett State: New York Zip: 11557  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Asher Schechter**  
Address: 70 -17 173rd Street  
City: Flushing State: NY Zip: 11365  
Phone: 718-228-8677 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Schechter is a musmach of Yeshiva Torah Vodaath. He has served as a orthodox pulpit rabbi in Oceanside, Merrick, Long Island, Fair Lawn & Hillcrest. In addition, he is a member of Agudas HaRabonim & Young Israel Council of Rabbis. He has been involved in kashrus for more than 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Gifts .Com - Sweet Expressions**  
Address: 310 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: New York State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **Net Cost Market**  
Address: 97-10 Queens Blvd  
City: New York State: New York Zip: 10374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **1202 Asli Kitchen Inc.**  
Address: 1202 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **1267 Cafe LLC**  
Address: 1387 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Star K**  
Address: 122 Slade Avenue - Suite 300  
City: Baltimore State: MD Zip: 21208  
Phone: 410-484-4110 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Star K operates under the auspices of Rabbi Moshe Heinemann. Rabbi M. Heinemann is well known in the orthodox Jewish Community as a Posek. In addition, Rabbi M. Heinemann serves as a rabbi at one of the largest synagogues in Baltimore MD.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **128 - 130 Cedarhurst SA Inc.**  
Address: 128 Cedarhurst Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **12th Ave Fish Market Inc.**  
Address: 5112 12th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi M.M. Weiss - Pupa**  
Address: 5112 12th Avenue  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-889-4662 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi M.M. Weiss attended

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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Commissioner  
KOSHER REGISTRATION FORM

1. Name of Establishment: **1326 Penn Operation Corp.**  
Address: 1326 Peninsula Blvd  
City: Hewlett                      State: New York                      Zip: 11557  
Phone: Blank                      Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst                      State: NY                      Zip: 11516  
Phone: 516-569-4536                      Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **138 W. 72 Grocers Inc.**  
Address: 138 W. 72 Street  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Israel Steinberg received semicha from Yeshiva Torah Vodaath in 1958. In addition, he was the Rabbi of Sea Side Jewish Center in Rockaway Park, NY. He currently is involved in Kashruth for several establishments throughout New York City & Long Island.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **13th Ave Dairy Inc.**  
Address: 4001 13th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **13th Ave Fish Market Inc.**  
Address: 4301 15th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi N.E. Teitelbaum - Volove**  
Address: 5808 11 Avenue  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-436-4685 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N.E. Teitelbaum learned in Satmar, Sharei Yoisher under Rabbi Kopelman & Navardik. In addition, he has practiced kashrus under the guidance of his father - the Nirbater Rav for 10 years & has been in kasrus since 1975 continuously.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **13th Avenue Foods Inc.**  
Address: 4621 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smicha in 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **13th Avenue Kosher Bakery Inc.**  
Address: 4603 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **New Square Kosher**  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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## KOSHER REGISTRATION FORM

1. Name of Establishment: **13th Avenue Supermarket LLC**

Address: 1274 39th Street

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **15th Ave Inc.**  
Address: 4322 15th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: 718-435-9523 Email: officekornsbakery.com
2. Name of Individual or Organization Certifying Food as Kosher: **OK KOSHER**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9589 Email: rrgreenberg@ok.org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

OK Kosher Certification is one of the leading kosher agencies, well known and registered with the States.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **yearly**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **16th Avenue Cafe Inc.**  
Address: 5320 16th Avenue  
City: Brooklyn State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **16th Avenue Grocery Inc.**  
Address: 5222 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **17th Ave Food Center Inc.**  
Address: 5803 17th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **2210 Pizza Corp.**  
Address: 2216 Victory Blvd  
City: Staten Island State: New York Zip: 10314  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Staten Island**  
Address: 36 Ismay Street  
City: Staten Island State: NY Zip: 10314  
Phone: 646-323-8987 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Staten Island was organized to certify kosher establishments on Staten Island. The Vaad is comprised of rabbis from the local synagogues that form the rabbinic board. The Vaad has been overseeing the kashrus of Staten Island stores for over 30 years. Rabbi Oppenheimer was appointed to implement the policies & standards that were adopted by the rabbinic board.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **27 Dressings Inc.**  
Address: 519 Middleneck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site **3** time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **2nd Avenue Deli**

Address: 162 East 33rd

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10016

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11218

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The International Kosher Council is directed by Rabbi Zev Schwarcz. He is a graduate and musmach of Telshe Yeshiva in Cleveland and has had over 20 years experience with Kashrus supervision, most of it with the OU. All of the International Kosher Council mashgichim are Orthodox, bnei yeshivos. All of the International Kosher Council mashgichim are Orthodox, bnei yeshivos.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **2nd Avenue Deli**

Address: 1442 1st Avenue

City: New York

State: New York

Zip: 10021

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The International Kosher Council is directed by Rabbi Zev Schwarcz. He is a graduate and musmach of Telshe Yeshiva in Cleveland and has had over 20 years experience with Kashrus supervision, most of it with the OU. All of the International Kosher Council mashgichim are Orthodox, bnei yeshivos. All of the International Kosher Council mashgichim are Orthodox, bnei yeshivos.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Montly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **34 Wok Inc.**  
Address: 34 East 34th Street  
City: New York State: New York Zip: 10016  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **345 Coffee Bar Inc.**  
Address: 345 Central Avenue  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **34th Street Donuts LLC**

Address: 51 East 34th Street

City: New York

State: New York

Zip: 10016

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

State: NY

Zip: 10024

Phone: 917-405-7222

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ).

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **3TS Pizza Cafe Corp.**  
Address: 3005 Avenue K  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher , built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **419 Pizza, LLC**  
Address: 419 Kingston Avenue  
City: Brooklyn State: New York Zip: 11225  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher**  
Address: 319 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The OK has provided premium kosher supervision to companies around the world since 1935. In 1968 the late Rabbi Berel Levy acquired the agency. Since 1987, the OK is under the leadership of his son, Rabbi Don Levy who received semicha from various leading rabbi including Rabbi Moshe Feinstein.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: 4305 16th Avenue Inc.

Address: 4305 16th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Amrom Roth - Beis Din of Karlsburg

Address: 1227 50th Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-438-6418

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A. Roth has been involved with kashrus for the last twenty years. Rabbi Roth worked in the institute of Kadasia in London & at the Eidah Hachreidis in Israel.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment NA

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **45th Street Bagel Inc.**  
Address: 22 W. 45th Street  
City: New York State: New York Zip: 10036  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **493 Park LLC**  
Address: 493 Park Ave  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave.  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC adheres to a very high standard of kosher restrictions. There are fifty well trained individuals & several qualified rabbinical coordinators to ensure the highest level of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **493 Park LLC**  
Address: 493 Park Ave  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave.  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC adheres to a very high standard of kosher restrictions. There are fifty well trained individuals & several qualified rabbinical coordinators to ensure the highest level of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **550 Central Avenue Management**  
Address: 550 Central Avenue  
City: Cedarhurst State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Of The 5 Towns**  
Address: 410 Hungry Harbor  
City: Valley Stream State: NY Zip: 11581  
Phone: 516-791-2130 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yehshua Eliyahu learned in Mir Yerushalim as well as Beth Medrash Govah in Lakewood NJ. He received Smicha from Rabbi Gidon Moshe as well as serving as a pulpit rabbi since 1995 in various Jewish Communities.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **605 Middleneck Corp.**  
Address: 605 Middleneck Rd  
City: Great Neck State: New York Zip: 11203  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **6th Avenue Gourmet Inc.**

Address: 51 Forest Road #116

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **7228 Main St. LLC**  
Address: 6929 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **786 Paradise Associates Inc.**

Address: 203 Avenue U

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11223

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **8 East 48th Street Cafe LLC**  
Address: 8 East 48th Street  
City: New York State: New York Zip: 10017  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Star K**  
Address: 122 Slade Avenue - Suite 300  
City: Baltimore State: MD Zip: 21208  
Phone: 410-484-4110 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Star K operates under the auspices of Rabbi Moshe Heinemann. Rabbi M. Heinemann is well know in the orthodox Jewish Community as a Posek. In addition, Rabbi M. Heinemann serves as a rabbi at one of the largest synagogues in Baltimore MD.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **888 Sushi LLC**  
Address: 888 Bedford Ave  
City: Brooklyn State: New York Zip: 11249  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: A & A Gourmet LLC  
Address: 188-09 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: A & A Gourmet LLC  
Address: 178-07 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **A & Z Kosher Meat Products Co Inc**  
Address: 123 Grand Street  
City: New York State: New York Zip: 11249  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: A Slice Above LTD  
Address: 378 5th Avenue  
City: New York State: New York Zip: 10018  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher Certification  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher , built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: A to Z Glatt Inc.  
Address: 186-05 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **A to Z Organic Inc.**  
Address: 142 Cedarhurst Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **AA Rubashkin & Sons Inc.**  
Address: 4310 14th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Chemed of Nitra - Rabbi M.M. Weissmandel**  
Address: 21 Park Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-352-7612 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The congregation was founded in 1947 in the USA for Hungarian Jewry. The focus was to rebuild the Nitra Jewish community. The kashrus division was formed to ensure the proper requirements (the highest standard) for the Nitra community. We currently have 7 supermarkets under our hashkacha in NY & NJ. Moshia Discount, KRM, Kosher Palace, Rubashkin, All Fresh, Shlomies Kosher World, Seasons, Brachs & Season (Passaic).

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: ABDD LLC

Address: 270 Route 59

City: Sffern

Phone: Blank

State: New York

Email: Blank

Zip: 10951

2. Name of Individual or Organization Certifying Food as Kosher: KOA - Rabbi Shlomo Isaacson

Address: 72 Ascension Street

City: Passaic

State: NJ

Zip: 7055

Phone: 973-777-0649

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi S. Isaacson has semicha from Rabbi E. Yolles ZT"L, Rabbi S.Z Friedman (Tenka Rov) & Rabbi C. Rabinowitz (Tosh). He has been involved in kashrus for the last 43yrs. working with organizations such as Saint Louis Vaad, OU, Kof K & CRC in Chicago.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Abes Fruit Inc.**  
Address: 4315 15th Ave  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Y. Babad studied in YeshivaBais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Abraham Paris**  
Address: 5313 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Israel Steinberg received semicha from Yeshiva Torah Vodaath in 1958. In addition, he was the Rabbi of Sea Side Jewish Center in Rockaway Park, NY. He currently is involved in Kashruth for several establishments throughout New York City & Long Island.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Achla Shawarma Factori Inc.**  
Address: 43 Kennedy  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ackerstein Caterers  
Address: 388 Hempstead Ave  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **AD Pastries Inc.**  
Address: 517 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Adar Dugim Inc.- Flushing Fish Market**  
Address: 8 Walworth  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Affairs Supplier**

Address: 159 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division

City: Brooklyn

Phone: 718- 384 - 6765

State: NY

Zip: 11204

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC adheres to a very high standard of kosher restrictions. There are fifty well trained individuals & several qualified rabbinical coordinators to ensure the highest level of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **AI Malka Brothers Inc.**  
Address: 59 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Aishes Chayil D' Kiryas Joel Mother Relief Center Inc.  
Address: 7 Chevron Road  
City: Monroe State: New York Zip: 10950  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel  
Address: 16 Garfield Rd. #102  
City: Monroe State: NY Zip: 10950  
Phone: 845-774-4040 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Albany Bakery Corp**  
Address: 337 Albany Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Albert's Fruits & Veg**  
Address: 730 Ave U  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yohai Oren**  
Address: 1960 East 7th Street  
City: Brooklyn State: NY Zip: 11229  
Phone: 917-699-4866 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi of Ahi Ezer Torah Center

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **All Fresh - Kosher Corner**  
Address: 706 Laurel Avenue  
City: Fallsburg State: New York Zip: 12733  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self -Certifying - Yoel Lowy**  
Address: 706 Laurel  
City: Fallsburg State: NY Zip: 12733  
Phone: 718-908-1987 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yoel Lowy learned the laws of Kosher & discusses issues of kashruth with the Pupa Dayan of Boro Park, NY - Rabbi Weiss

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **All Fresh Produce Inc.**

Address: 19 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Chemed of Nitra - Rabbi M.M. Weissmandel**

Address: 21 Park Lane

City: Mornsey

Phone: 845-352-7612

State: NY

Zip: 10952

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The congregation was founded in 1947 in the USA for Hungarian Jewry. The focus was to rebuild the Nitra Jewish community. The kashrus division was formed to ensure the proper requirements (the highest standard) for the Nitra community. We currently have 7 supermarkets under our hashkacha in NY & NJ. Moshia Discount, KRM, Kosher Palace, Rubaskin, All Fresh, Shlomies Kosher World, Seasons, Brachs & Season (Passaic).

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **All Fresh Supermarket Inc.**  
Address: 46 Harrison Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Jacob Kohn**  
Address: 70 Ross St. #6 E  
City: Brooklyn State: NY Zip: 11219  
Phone: 347-489-0372 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Jacob Kohn learned in yeshiva UTA. He studied halacha & received semicha from Rabbi Teitelbaum of Kiryas Joel NY. He is well versed in the area of kosher food & asked all his questions to the Beis Din of Vhazmanim in Williamsburg NY.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

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## KOSHER REGISTRATION FORM

1. Name of Establishment: All In A Nutshell Inc.  
Address: 3008 Avenue K  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Amrom Roth  
Address: 1227 50th Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-438-6418 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Amrom Roth received his ordination from Beit din of Karlsburg. In addition Rabbi Roth has been in kashrus for the last 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **All State Distributors USA Inc.**

Address: 59 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave.

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC adheres to a very high standard of kosher restrictions. There are fifty well trained individuals & several qualified rabbinical coordinators to ensure the highest level of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Alpine Pastry Shoppe**  
Address: 59 Route 111  
City: Monsey State: New York Zip: 11787  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Marcy Wagner**  
Address: 24 Penataquit Place  
City: Huntington State: NY Zip: 11754  
Phone: 516-658-9649 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Marcey Wagner servers as the spirtual leader of Chavurat Emet Congregation. She has been on staff for the last 3 years. She's held pulpit postions in sevrsl synagogues across Long Island for the last 20 years. She was ordained by the Jewish Theological Seminary .

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Alter Weber  
Address: 117 Lavista Drive  
City: S. Fallsburg State: New York Zip: 12733  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Alter Weber  
Address: 117 Lavista Drive  
City: Brooklyn State: NY Zip: 12733  
Phone: 845-434-2859 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Alter Weber learned in Kehilath Yaakov Pupa. He currently davens at Cong. Toldos Avrohom Yitzchok in Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Amaleya I Corp.**  
Address: 68-24 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Yecheil Boruhov**  
Address: 102- 40 62 Avenue  
City: Forest Hills State: NY Zip: 11375  
Phone: 718-962-5106 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yecheil learned at Ohr Chaim in Beer Sheva & lived in Israel for 12 years. He currently prays at Beth Gavriel on 108th Street.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Amnon Kosher Pizza Inc.**  
Address: 4814 13th Ave  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Amsterdam Ave Market LLC**  
Address: 661 Amsterdam Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Amsterdam Avenue Bagels Inc.**  
Address: 391 Amsterdam Avenue  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **New York Kosher**  
Address: 297 S. Washington Avenue  
City: Bergenfield State: NY Zip: 7621  
Phone: 917-825-2992 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

New York Kosher is under Rabbi Yaakov Neiman. Rabbi Y. Neiman received semicha from Ner Israel in Baltimore & has over 25 years of experience in kashruth. Some of the strict guidelines that New York Kosher follows are Shabbos & Yom Tov - closed, mashgiach on premises & Cholov Yisroel.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Amsterdam Bagels LLC**

Address: 676 Amsterdam Ave

City: New York

State: New York

Zip: 10025

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**

Address: 141-49 73rd Street

City: Flushing

State: NY

Zip: 11367

Phone: 718-520-9060

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Month**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Andy Foods Inc.  
Address: 35-66 73rd Street  
City: Jackson Heights State: New York Zip: 11372  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Month

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **ANDYS ITALIAN ICES, LLC**  
Address: 170 Verdi St  
City: Farmingdale State: New York Zip: 11735  
Phone: 516-972-7959 Email: andrew@andysitalianices.com
2. Name of Individual or Organization Certifying Food as Kosher: **OK KOSHER**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9589 Email: rrgreenberg@ok.org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

OK Kosher Certification is one of the leading kosher agencies, well known and registered with the States.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per yearly

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Annie's K Kitchen LLC

Address: 72-74 Main Street

City: Flushing

Phone: Blank

State: New York

Email: Blank

Zip: 11367

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens

Address: 141-49 73rd Street

City: Brooklyn

Phone: 718-520-9060

State: NY

Zip: 11367

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Anshei 1420 Corp.**  
Address: 4720 New Utrecht  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Beryl Weider**  
Address: 39 Weiner Drive  
City: Monsey State: NY Zip: 10952  
Phone: 718-436-1234 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Beryl Weider is part of the Klausenberg community. Rabbi B. Weider received semicha from the Linzer Rav in 2007 & is well versed in the laws of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Any Bagel Inc.  
Address: 598 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Appel Fish Store

Address: 137 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave.

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11247

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC adheres to a very high standard of kosher restrictions. There are fifty well trained individuals & several qualified rabbinical coordinators to ensure the highest level of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Appels Superette Inc.**

Address: 450714th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Appetizing Plus Inc.

Address: 4801 18th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Self Certified - Leon Sampson

Address: 4801 18th Ave

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-438-0848

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Leon Sampson learned in a Lubavich School. He studies Talmud & the code of Jewish law at Yeshivat Chiddushi Harim in Tel Aviv, Israel.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Arimerbew Co Inc.**  
Address: 2429 Broadway  
City: New York State: New York Zip: 10004  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - Ira Goller**  
Address: 2429 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-724-2650 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

I have been owning, running & operating a dairy restaurant in Queens NY that was under the supervision of the Vaad of Queens. My responsibilities included ordering & checking all products to ensure proper certification. Additionally, My wife & I keep a kosher home. I'm also responsible to maintain the separation of non- kosher & kosher items within the Arimerbew store. .

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **no**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **no**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **no**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **no**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **no**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Aron's Fruit Emporium Inc.**

Address: 5208 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Arzu Restaurant Corp.  
Address: 101-05 Queens Blvd  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisrael Steinberg  
Address: 1853 53 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinberg received semicha from Torah Vodaath & is a member of the Rabbinical Alliance of America (RAA).

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Associated Supermarket**

Address: 480 Avenue P

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11223

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - Abraham Goldstein**

Address: 2037 53rd Street

City: Brooklyn

Phone: 718-375-6815

State: NY

Zip: 11204

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Abraham Goldstein learned in Yeshiva & Kollel Harbatzas Hatorah & is affiliated with Khal Tartikov - Rabbi Yecheil Babad.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Atrium Bagels & Cafe**  
Address: 401 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitz yeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site **4** time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ave M Kosher Bagel and Lox LLC  
Address: 1712 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 3 time(s) per Month

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Avenue J Fish Center Inc.  
Address: 1215 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave.  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Avenue M Foods Inc.**  
Address: 1920 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1017 16th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Teitelbaum has been involved with Kashrus since 1983. He received semicha from Rabbi Moshe Feinstein, Rabbi Shmuel Wosner & Rabbi A. Bloom He is also know as the Nirbater rov & well know within the Jewish community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Avenue M Kosher Bakery

Address: 1302 Avenue M

City: Brooklyn

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave.

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Avenue R Cafe**  
Address: 97 RT. 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Ulman**  
Address: 1 Louis Avenue  
City: Monsey State: NY Zip: 10952  
Phone: 845-352-3210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Ulman took over after Rabbi Shlomo Breslauer passed away - Rabbi S. Breslauer was the Rav of Congregation Bais Teffilah in Monsey for the past 40 years. He learned in Torah Voda & Bais Medrash Gevoah in Lakewood, NJ. In addition, he received semicha from his father Rabbi Yehudah Breslauer & Rabbi Newshloss of New Square.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Avenue S Mini Market**  
Address: 802 Avenue S  
City: Brooklyn State: New York Zip: 11233  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Y. Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Month

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Avner Kosher Fish Market  
Address: 521 Kings Hwy.  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Asher Hachuel  
Address: 508 Ave M  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-382-6063 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Asher Hachuel is a graduate of the Mirrer Yeshiva in Brooklyn, NY. He has been in the field of kashruth for the past 20 years in the Sephardic community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Avner's Kosher Fish Direct inc.  
Address: 316 Avenue U  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Sephardic Bet Din  
Address: 1554 E.9th  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-627-6130 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A. Hachuel & Rabbi Y. Hachuel are graduates of Mir Yeshiva & have been involved in Kashrut in the Sephardic community for the past 25 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Avraham Bakery Inc.  
Address: 73-15 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Avrumi's Bakery Inc.**

Address: 164 Wallabout

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11206

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division

City: Brooklyn

Phone: 718- 384 - 6765

State: NY

Zip: 11204

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Azrael Food Dynasty Inc.**  
Address: 691 Amsterdam Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Karshrus**  
Address: 276 Riverside Drive  
City: New York State: NY Zip: 10025  
Phone: 212-866-3442 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mehadrin Kashrus is a community based kosher supervision agency, directed by Rabbi Avrohom Marmorstein, rabbi of Kehilas Minchas Chinuch of the Westside in Manhattan. All establishments serving meat must have a mashgiach temidi on premises. Rabbi Marmorstein is a graduate of Yeshiva of Gatehead & Beth Medrash Govoha in Lakewood N.J.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Azuri Cafeteria Inc.

Address: 465 W.51st Street

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10019

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: New York

Phone: 718-635-1037

State: NY

Email: Blank

Zip: 11218

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **B - H Kosher Bagels Inc.**  
Address: 1431 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **B & B Food Market Inc.**

Address: 78 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - Moses Bondo**

Address: 78 Lee Avenue

City: Brooklyn

Phone: 347-526-9693

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Moses Bondos learned in United Talmud Academy for 3 years & continues his studied in kosher law.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **B & H Kosher Bakery Inc.**

Address: 188 Lee Avenue

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **B&H KOSHER BAKERY**

Address: 380 Flushing Ave

City: Brooklyn

Phone: 347-585-6956

State: New York

Zip: 11205

Email: jgluck6956@gmail.com

2. Name of Individual or Organization Certifying Food as Kosher: **VOLOVE VK KASHRUS**

Address: 5808 11 AVE.

City: BROOKLYN

Phone: 718-436-4685

State: NY

Zip: 11219

Email: RBT@vkkosher.org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

VOLOVE VK KASHRUS

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods?
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- Are all utensils and equipment clearly identified as kosher or nonkosher?
- Are Nonkosher products mixed with kosher products and then sold as kosher?

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **B&H Roze Corp.**  
Address: 3715 13th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacdu Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Babiuch Corp.**  
Address: 269A W231 Street  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagel 786 LLC**  
Address: 130 West 72nd Street  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi David Saffra - Tablet K**  
Address: 8 Copperbeach Ln  
City: Lawrence State: NY Zip: 11516  
Phone: 516-569-9083 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagel Boss Hicksville Inc.**  
Address: 432 South Bay Road  
City: Hicksville State: New York Zip: 11801  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Asher Schechter**  
Address: 70 -17 173rd Street  
City: Flushing State: NY Zip: 11365  
Phone: 718-228-8677 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Schechter is a musmach of Yeshiva Torah Vodaath. He has served as a orthodox pulpit rabbi in Oceanside, Merrick, Long Island, Fair Lawn & Hillcrest. In addition, he is a member of Agudas HaRabonim & Young Israel Council of Rabbis. He has been involved in kashrus for more than 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Bagel Hut Inc.  
Address: 503 Middle Neck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi David Saffra - Tablet K  
Address: 8 Copperbeach Ln  
City: Lawrence State: NY Zip: 11516  
Phone: 516-569-9083 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagel King LLC**  
Address: 333A Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Bagel Mentch Inc.  
Address: 176 Middleneck Road  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagel of Peninsula**  
Address: 1352 Peninsula Blvd  
City: Hewlett State: New York Zip: 11557  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Asher Schechter**  
Address: 70 -17 173rd Street  
City: Flushing State: NY Zip: 11365  
Phone: 718-228-8677 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Schechter is a musmach of Yeshiva Torah Vodaath. He has served as a orthodox pulpit rabbi in Oceanside, Merrick, Long Island, Fair Lawn & Hillcrest. In addition, he is a member of Agudas HaRabonim & Young Israel Council of Rabbis. He has been involved in kashrus for more than 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Bagels N Green  
Address: 5113 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagels N Green**  
Address: 5702 18th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Bagels N Green  
Address: 1379 Coney Island  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagels N Green BP LLC**

Address: 5193 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**

Address: 5207 19th Avenue

City: Brooklyn

State: NY

Zip: 11204

Phone: 347-254-4620

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bagels N More Inc.**

Address: 4305 14th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Baguette Express N More Inc.  
Address: 1013 East 14th Street  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Baguette Express of Brooklyn Inc.**  
Address: 250 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 1518 Presidents Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Baiseinu  
Address: 95 Devany Road  
City: Ferndale State: New York Zip: 12734  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self -Certifying - Lazer Luria  
Address: 95 Devany Ave  
City: Ferndale State: NY Zip: 12734  
Phone: 845-295-3111 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Lazer Luria is a member of Stolin. He learned in Torah Vodaath, Karlin Stolin, Talmudical Yeshiva of Phila & Bais Binyomin in Stanford CT

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bak Foods Inc.**  
Address: 131 Central Park Road  
City: Plainview State: New York Zip: 11803  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bakehouse on Coney**  
Address: 1371 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bakery at Tops**  
Address: 3980 Maple Avenue  
City: Buffalo State: New York Zip: 14226  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **BVK - Vaad of Buffalo**  
Address: 105 Maple Road  
City: Willamsville State: NY Zip: 14221  
Phone: 716-634-3990 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Moshe Taub received Yadin Yadin from the Lakewood Yeshiva (BMG) & was trained by Rabbi M. Levin from the COR. He is the Rav of Young Israel of Buffalo & is a member of AKO. In addition, he is a weekly columnist in the international magazine, Ami, & was awarded Rabbi of the Year in 2005

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Baku Palace Kosher Midwood Inc.**  
Address: 1787 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**  
Address: 1206 Avenue J  
City: Brooklyn State: NY Zip: 11230  
Phone: 347-203-0289 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Baron Bagel Bakery Inc.**

Address: 4807 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Barron's Grocery**

Address: 5574 Rt. 42

City: Fallsburg

Phone: Blank

State: New York

Email: Blank

Zip: 12733

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Jacob Rottenberg**

Address: 1 Gorlitz Ct. #101

City: Monroe

State: NY

Zip: 10950

Phone: 845-662-1116

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Jacob Rottenberg is a Satmar Chosid. He learned in the Mesivta of London & in the United Talmudic Academy of Monroe NY.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Basil LLC**

Address: 270 Kingston Avenue

City: Brooklyn

State: New York

Zip: 11213

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**

Address: 1518 President Street

City: Brooklyn

State: NY

Zip: 11213

Phone: 718-604-2500

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Basil on Central Corp.**

Address: 270 Kingson Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11213

2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**

Address: 11 Broadway

City: New York

Phone: 212-563-4000

State: NY

Zip: 10004

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bay Terrace Kosher Restaurant Inc.**  
Address: 211-37 26th Ave  
City: Bayside State: New York Zip: 11360  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Paul Plotkin**  
Address: 7205 Royal Palm Blvd  
City: Margate State: FL Zip: 33003  
Phone: 954-970-4281 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi P. Plotkin received semicha from Jewish Theological Seminary of America. In 1990, he established a Rav Hamachshir program with the Rabbinical Assembly to teach Conservative Rabbis how to certify establishments for kashruth.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BaZnGa CaFe**  
Address: 426 Amsterdam Avenue  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisrael Steinberg**  
Address: 1853 53 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinberg received semicha from Torah Vodaath & is a member of the Rabbinical Alliance of America (RAA).

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BB#1 Pizza Corp.**  
Address: 854 Amsterdam Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Karshrus**  
Address: 276 Riverside Drive  
City: New York State: NY Zip: 11205  
Phone: 212-866-3442 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mehadrin Kashrus is a community based kosher supervision agency, directed by Rabbi Avrohom Marmorstein, rabbi of Kehilas Minchas Chinuch of the Westside in Manhattan. All establishments serving meat must have a mashgiach temidi on premises. Rabbi Marmorstein is a graduate of Yeshiva of Gatehead & Beth Medrash Govoha in Lakewood N.J.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 4 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BDJ Vegan 1 Inc.**  
Address: 259 West 23rd Street  
City: New York State: New York Zip: 10011  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**  
Address: 648 E.4th Street  
City: Brooklyn State: NY Zip: 11218  
Phone: 718-635-1037 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Beets Supermarket Inc.**

Address: 3 Satmar Drive

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ben P. Corp.**  
Address: 188-02 Union Turnpike  
City: Flushing State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Beni's Kosher Pizza & Dairy Restaurant Inc.**  
Address: 72-72 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Benny's Brick Oven Inc.**  
Address: 1802 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Benny's Famous Pizza Plus Inc.**  
Address: 4514 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 4 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ben's Kosher Delicatessen**  
Address: 718 Central Park  
City: Scarsdale State: New York Zip: 10583  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Paul Plotkin**  
Address: 7205 Royal Palm Blvd  
City: Margate State: FL Zip: 33003  
Phone: 954-970-4281 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi P. Plotkin received semicha from Jewish Theological Seminary of America. In 1990, he established a Rav Hamachshir program with the Rabbinical Assembly to teach Conservative Rabbis how to certify establishments for kashruth.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ben's One Stop Kosher LTD**  
Address: 368 New Hempstead Road  
City: New City State: New York Zip: 10956  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisrael Steinberg**  
Address: 1853 53 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinberg received semicha from Torah Vodaath & is a member of the Rabbinical Alliance of America (RAA).

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Benz's Food Products Inc.**  
Address: 332 Albany Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union - OU**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 4 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Berry Queens LLC**  
Address: 69-48 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Best Bagel Bakery Inc.**

Address: 4704 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Best Fro Yo LTD**  
Address: 361 Mamaroneck Avenue  
City: White Plains State: New York Zip: 10605  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Greenberg**  
Address: 135 Old Mamaroneck Road  
City: White Plains State: NY Zip: 10605  
Phone: 914-714-9165 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Shmuel Greenberg as ordained from Mir Yeshiva & Rabbi Moshe Feinstein. In addition, Rabbi S. Greenberg is the rabbi of Young Israel of White Plains since 1987.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Best Quality Kosher 18th Avenue Pizza Inc.**  
Address: 4923 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Amrom Roth - Beis Din of Karlsburg**  
Address: 1227 50th Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-438-6418 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A. Roth has been involved with kashrus for the last twenty years. Rabbi Roth worked in the institute of Kadasia in London & at the Eidah Hachreidis in Israel.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bet Sharga Hebrew Academy of the Capitol District**  
Address: 54 Sand Creek Road  
City: Albany State: New York Zip: 12205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashruth of the Capitol District**  
Address: 877 Madison Ave  
City: Albany State: NY Zip: 12208  
Phone: 518-4801530 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashruth standards for the Vaad of the Capitol District are determined by a group of lay people from member synagogues who form the lay leadership of the Vaad. The officers of the Vaad work closely with its Rav HaMachshir to ensure a well- functioning Vaad. The Rav Hamchsir is Rabbi Moshe Bomzer who has been in kashruth for over 30 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BH Baker Food Inc.**  
Address: 1385 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BH Kosher Bagel Inc.**  
Address: 1431 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BH Pizza LLC**  
Address: 421 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitz yeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BHJG, LLC**  
Address: 590 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: BHNG Inc.  
Address: 1775 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BHS&D Corp.**  
Address: 3053 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**  
Address: 1206 Avenue J  
City: Brooklyn State: NY Zip: 11230  
Phone: 347-203-0289 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site **3** time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Big Chill Ice Cream Co LLC**  
Address: 1060 A Broadway  
City: Woodmere State: New York Zip: 11598  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Big Fleishig's Inc.**  
Address: 5508 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bigd Franchising LLC**  
Address: 795 Columbus Avenue  
City: New York State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision - Rabbi A.D. Mehlman**  
Address: 270 West 84th Street  
City: Manhattan State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Mehlman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bitachan 1 Inc.**  
Address: 1124 E.23rd  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Bites Cafe Inc.  
Address: 1 Perlman Drive  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitz yeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fischele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BK Hummus Inc.**  
Address: 1673 East 13th  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bleu on 13th Inc.**  
Address: 1279 50th Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BLND Corp.**  
Address: 3701 Nostrand Ave  
City: Brooklyn State: New York Zip: 11235  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: Manhattan State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Melhman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Blue Gold Equities LLC**

Address: 68-18 Main Street

City: Flushing

State: New York

Zip: 11367

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**

Address: 141-49 73rd Street

City: Flushing

State: NY

Zip: 11367

Phone: 718-520-9060

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Blushan Foods Corp.**  
Address: 5683 Riverdale Avenue  
City: Bronx State: New York Zip: 10471  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bochner Nacha**  
Address: 5001 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Chaim Friedman**  
Address: 5001 16th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-8104 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Chaim Freidman learned in Yeshiva for 20 years. He has been in the Kosher business for the past 15 years & caters to the chasidishe community of Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Boeuf & Bun Corp.**  
Address: 271 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 1518 President Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bogo Pizza Corp.**  
Address: 206 Rockaway Turnpike  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bordeaux LLC**  
Address: 1922 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Boronitzi LLC**  
Address: 5326 New Utrecht Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Boutique Butcher**  
Address: 311 Avenue U  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Star K**  
Address: 122 Slade Avenue - Suite 300  
City: Baltimore State: MD Zip: 21208  
Phone: 410-484-4110 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Star K operates under the auspices of Rabbi Moshe Heinemann. Rabbi M. Heinemann is well known in the orthodox Jewish Community as a Posek. In addition, Rabbi M. Heinemann serves as a rabbi at one of the largest synagogues in Baltimore MD.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BP Deals Inc.**  
Address: 188 Division Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - Dovid Bleich**  
Address: 1449 60th Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 917-662-5117 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Dovid Bleich is part of the Boro Park community & davens at Avnei Pinchas on 17th Ave. In addition, he has studied various section of Talmud & Yoreh Deah which enabled him to be well versed in kosher law.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BP Sub Express Inc.**

Address: 5217 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Brand Newday LLC**  
Address: 320 Saddle River Road  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitz yeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fischele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Braun Tuna  
Address: 72-14 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Braun's Fish Store**

Address: 310 Marcy Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Breadberry Inc.**  
Address: 1683 60th Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bronx Bake Shoppe LLC**  
Address: 5663 Riverdale Avenue  
City: Bronx State: New York Zip: 10471  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Brooklyn Brick Oven Pizza LLC**  
Address: 1146 Route 52  
City: Loch Sheldrake State: New York Zip: 12759  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Brunch NY Inc**  
Address: 161 Division Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Brunchese Inc**  
Address: 35 Jefferson Avenue  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **New Square Kosher**  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **BSD - Bagel D' Lox**  
Address: 421 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitz yeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Bubby P Inc.  
Address: 3914 Fort Hamilton  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Buddha Bodai**  
Address: 77 Mulberry Street  
City: New York State: New York Zip: 10017  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**  
Describe soaking and salting process: **N/A**
5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Burger & Grill Bar Inc.**  
Address: 2543 Amsterdam Avenue  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Burger Delight Inc.**  
Address: 147-41 Union Turnpike  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Burnside Avenue Donuts Inc.**  
Address: 299 Burnside Avenue  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Buster E. Pizza Corp.**  
Address: 181-30 Union Turnpike  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Buy Rite Supermarket**  
Address: 13 Greenfield  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **By The Way Bakery LLC**  
Address: 2440 Broadway  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Daniel Cohen**  
Address: 301 Strawberry Hill Ave  
City: Stanford State: CT Zip: 6902  
Phone: 203-252-8252 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi D. Cohen is the Rabbi for Agudath Sholom longest modern orthodox congregation in New England. He graduated from YU & is a member of RCA.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: C & G Queens Inc.  
Address: 67-11 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **C N G Foods LLC**  
Address: 1376 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cafe 28 USA LLC

Address: 28 Throop Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11216

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cafe Au Lee**  
Address: 193 Lee Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cafe Hadar LLC  
Address: 2923 Avenue N  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cafe Kriza LTD**  
Address: 45 A Middleneck Road  
City: Great Neck State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Badatz Mekor Haim - NY**  
Address: 84-31 117 Street  
City: Richmond Hill State: NY Zip: 11418  
Phone: 646-368-0412 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Eliyahu Ben - Chaim is the chief Sephardi rabbi. He is the Av Beit Din of Mekor Haim. Rabbi E. Ben-Chaim studied in Yeshivat Porat Yosef & received semicha from Rabbi Ezra Attia. Rabbi E. Ben-Chaim has been the spiritual leader of the Mashadi Persian Jewry since 1979. He has lectured in many Jewish schools & communities.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cafe Paris Inc**

Address: 4424 16th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Wosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cafe Petit Inc.**  
Address: 398 Central Ave  
City: Cedarhurst State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cafe Upstate LLC  
Address: 5426 Route 42  
City: Fallsburg State: New York Zip: 12733  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cafe Venezia Corp.  
Address: 1391 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Arugath Habosem**

Address: 203 Whittiker Road

City: Hurleyville

State: New York

Zip: 12747

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Yosef Grunwald**

Address: 559 Bedford Avenue

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-9387-3036

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yosef Grunwald is currently the Rav of Khal Arugath Habosem. He oversees various food processors such as Kedem products. In addition he learned in Yeshiva Arugath Habosem, Yeshiva Nitra & Yeshivas Belz in Israel.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Bais Yaakov**  
Address: 482 Stanton Corners Road  
City: Ferndale State: New York Zip: 12734  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Moshe Eli Pichey**  
Address: 482 Stanton Corners Road  
City: Ferndale State: NY Zip: 11211  
Phone: 617-347-1284 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Moshe Pichey learned in Yeshiva Torah Temimah Brooklyn, NY, Brisk - Yerushlaim, Israel, Bais Medrash Gevoah Lakewood, NJ & the Kollel of Boston in Boston, MA.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Bnei Shimon Yisroel**  
Address: 5555 Route 42  
City: Fallsburg State: New York Zip: 12734  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Herman Meisels**  
Address: 217 Hewes Street  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-384-0618 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Herman Meisels was ordained by the Rabbinic board of Arugath Habosem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Bnos Yakov**  
Address: 15 Levine Lane  
City: Swan Lake State: New York Zip: 12734  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kehilas Yakov Kashrus of Pupa**  
Address: 688 Bedford Avenue  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-534-5608 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilas Yacov of Pupa requires their certifiers to complete an extensive training program in the laws of kashrus. Once the individual has completed the training, they are tested & approved by the senior rabbonim of Pupa.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Chaviva LLC**  
Address: 1106 Ulster Heights Road  
City: Ellenville State: New York Zip: 12428  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self -Certifying - Yitzy Lieberman**  
Address: 1106 Ulster Heights Road  
City: Ellenville State: NY Zip: 11249  
Phone: 845-647-7600 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All food is ordered & prepared by Mrs. Mureh who has extensive experience with kosher & is a chef in Lakewood, NJ. All questions are addressed to Rabbi Shalom Kaminsky of Philadelphia.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Camp Chedvah Inc.

Address: 396 Aden Road

City: Liberty

Phone: Blank

State: New York

Email: Blank

Zip: 12754

2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Rabbi Yehuda Levi

Address: 396 Aden Road

City: Liberty

Phone: 845-292-7986

State: NY

Zip: 12754

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yehuda Levi is a musmach of Telshe Yeshiva. Any questions in terms of kashrus is directed to the Vaad Hakashrus of Baltimore.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Camp Hasc Inc.  
Address: 361 Parksville Road  
City: Parksville State: New York Zip: 12768  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yehuda Willig  
Address: 361 Parksville Road  
City: Parksville State: NY Zip: 12768  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Y. Willig learned in KBY, Hechiel Hatorah, Mir & YU. He attended Shirurim by Rabbi M. Genack of the OU & has simush from Rabbi M. Willig of YU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Camp Kehilath Yakov  
Address: 54 Bushville Road  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Kehilas Yakov Kashrus of Pupa  
Address: 688 Bedford Avenue  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-534-5608 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilas Yacov of Pupa requires their certifiers to complete an extensive training program in the laws of kashrus. Once the individual has completed the training, they are tested & approved by the senior rabbonim of Pupa.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Mesivta Nachlas Yaakov**  
Address: 143 Labaugh Road  
City: Lake Sheldrake State: New York Zip: 12789  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Osher A. Katz**  
Address: 171 Penn Street  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-338-1887 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Osher Katz is the Rav of Cong. Adas Yereim & a member of Central Rabbinical Congress - CRC.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Mosdos Noam Elimelech**  
Address: 61 Mount Hope Road  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Munk**  
Address: 164 Queen Mountain Road  
City: Ferndale State: New York Zip: 12734  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Dovid Cohen**  
Address: 1518 E. 7th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-7388 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Dovid Cohen is the Rav of Guul Yaavetz -a shul in Brooklyn, NY for the last 52 years. He received semicha from Rabbi Y. Hutner & Rabbi Y. Ruderman In addition, he has been an editor for the Talmudic Encyclopedia & the Chaplain for Ohel the past 45 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Nitra**  
Address: 153 Budd Road  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Ari Grunhut**  
Address: 760 Kent Ave  
City: Brooklyn State: NY Zip: 11248  
Phone: 347-451-3554 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Ari Grunhut learned in Yeshiva D' Monsey for 2 years. During this time he concentrated on the laws pertaining to Kosher Food. In addition, he continuously attends classes pertaining to Kosher food.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Camp Rayim Inc.  
Address: 263 Breezy Hill Road  
City: Parksville State: New York Zip: 12768  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Moshe Rosner  
Address: 263 Breezy Hill Road  
City: Parksville State: NY Zip: 12768  
Phone: 845-292-4600 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Moshe Roser learned in a rabbinical college from 1973-1988 & took courses on maintaining a kosher kitchen. He also worked for the OU - supervising plants locally & overseas. In addition, he is the president of his synagogue - Anshe Sfard, & makes decisions which foods are allowed into the catering hall.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Camp Ruach Chaim  
Address: 641 Knickerbocker Road  
City: Livingston Manor State: New York Zip: 12753  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Tzvi Perlstein  
Address: 124 Ned Drive  
City: Lakewood State: NJ Zip: 8701  
Phone: 732-503-3596 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Tzvi Perlstein has been studying the laws of kashrus for the past five years in Bais Medrash Gevoha Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Yeshiva**

Address: 1302 Brisco Road

City: Swan Lake

State: New York

Zip: 12783

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Dovid Ehrenfeld**

Address: 1705 49th Street

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-435-9217

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi D. Ehrenfeld received semicha from Rabbi Padwa - the Rav of London, England. He was appointed assistant Rosh Yeshiva for Yeshiva Ch'san Sofer in 1984 & later became the Rosh Hayeshiva in 2012. In addition, he was the kosher coordinator for Kosher 613 from 1990-1998.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Camp Zichron Zvi Dovid**  
Address: 653 Heiden Rd.  
City: S. Fallsburg State: New York Zip: 11229  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Mordechai Fasten**  
Address: 653 Heiden Rd.  
City: S. Fallsburg State: NY Zip: 11219  
Phone: 845-434-3410 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Camp Director, Mordechai Fasten visits the kitchen multiple times a day, with guidelines set forward by our local Rabbi. The local Rabbi (Rabbi SY Tauber) stops by unannounced a few times a week just to make sure that all guidelines are followed through.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Canarsie Fruit Arrangements LLC**  
Address: 1557 Ralph Ave  
City: Brooklyn State: New York Zip: 11236  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Candy On Broadway Inc.**

Address: 2528 Broadway

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 11025

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: Manhattan

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Mehlman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Candymaven NYC Inc.**

Address: 4819 16th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Capital Ice LLC**  
Address: 296 Central Avenue  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Carbolicious Inc.**

Address: 73 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Carlos & Gabby's of Riverdale Inc.**  
Address: 5685 Riverdale Avenue  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Carousel Cakes**  
Address: 5 Seeger Drive  
City: Nanuet State: New York Zip: 10954  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: Manhattan State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Mehlman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Carvel #2804  
Address: 189 Beach 116th Street  
City: Rockaway Park State: New York Zip: 11694  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cascon Cheesecake**  
Address: 704 149th Street  
City: Whitestone State: New York Zip: 11357  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi David Saffra - Tablet K**  
Address: 8 Copperbeach Ln  
City: Lawrence State: NY Zip: 11516  
Phone: 516-569-9083 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Caspian Inc.  
Address: 1 The Intervale  
City: Roslyn Heights State: New York Zip: 11576  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Catering Gourmet LLC**

Address: 5326 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Catskill Barbecue LLC**  
Address: 5215 Main Street  
City: S. Falsburg State: New York Zip: 12779  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Catskills Bakery Corp.

Address: 4437 Route 42

City: Monticello

Phone: Blank

State: New York

Email: Blank

Zip: 12701

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Catskills Heimesh Bakery**  
Address: 66 Pleasant Street  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Catskills Kosher Express Inc.

Address: 4760 Route 42

City: Kiamesha Lake

State: New York

Zip: 12751

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Self Certifying - Yissocher Dovid

Address: 4760 Route 42

City: Kiamesha Lake

State: NY

Zip: 12751

Phone: 845-791-7111

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yissocher Dovid learned in localeshivas in Melbourne Australia & in Viznitz in Kiamesha Lake New York. He is part of the Viznitz community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cebeh Corp.**  
Address: 792 Eastern Parkway  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 1518 President Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cedarhurst Sushi Inc.  
Address: 119 Cedarhurst Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Center Fresh Inc.  
Address: 4515 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Avenue Market**

Address: 330 Central Ave

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Perk Cafe LLC**

Address: 105 Cedarhurst Ave

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Pizza Corp.**

Address: 344 Central Ave

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Yetev Lev D'Satmar Meats**  
Address: 38 Joyland Road  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Leibish Teitelbaum**  
Address: 141 Ross Ave.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-302-6720 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Yetev Lev D'Satmar Meats**  
Address: 184 Hasbrouck  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Leibish Teitelbaum**  
Address: 141 Ross Ave.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-302-6720 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Yetev Lev D'Satmar Meats**  
Address: 5301 New Utrecht Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Leibish Teitelbaum**  
Address: 141 Ross Ave.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-302-6720 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Yetev Lev D'Satmar Meats**

Address: 3711 Route 42

City: Monticello

State: New York

Zip: 12701

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Leibish Teitelbaum**

Address: 141 Ross Ave.

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-302-6720

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Central Yetev Lev D'Satmar Meats**  
Address: 433 Route 52  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Leibish Teitelbaum**  
Address: 141 Ross Ave.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-302-6720 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chabad Lubavitch Hospitality Center**  
Address: 270 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 1518 President Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chabad Lubavitch of Rochester Inc.**  
Address: 1037 S. Winton Road  
City: Rochester State: New York Zip: 14618  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Dovid Mochkin**  
Address: 1037 S. Winton Road  
City: Rochester State: NY Zip: 14618  
Phone: 585-820-8298 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Dovid Mochkinis affiliated with the Lubavich community in Rochester. In addition, he received semicha from the Central Yeshiva - Tomchi Tmimim Lubavitz in Brooklyn, NY

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chadash Falafel & Pizza Inc**

Address: 1919 Avenue M

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**

Address: 1206 Avenue J

City: Brooklyn

Phone: 347-203-0289

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chai Pizza LLC**

Address: 94 Rt. 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chaim Lieff - Sky Bread LLC**

Address: 1817 Avenue M

City: Brooklyn

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chaim's Grocery**

Address: 7 Heyward Street

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11249

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chaim's Grocery**  
Address: 343 Roebling Street  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chaim's Grocery Inc.**

Address: 73 Lee Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Chalet Hotel  
Address: 50 Chester Rd.  
City: Woodbourne State: New York Zip: 12734  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chap a Nosh of Brooklyn LLC**  
Address: 1424 Elm Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yaakov Reisman**  
Address: 137 Lord Avenue  
City: Lawrence State: NY Zip: 11559  
Phone: 516-239-5306 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yaakov Reisman received semicha from Telshe Yeshiva in Ohio. He has been serving as a pulpit rabbi since 1984 & has been involved with kashruth since 1988.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chatanooga Restaurant Corp.**  
Address: 37 Cuttermill Road  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chaya Mushkah Restaurant Corp.**  
Address: 251 W.85th Street  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher , built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cheesy Kosher Inc.**  
Address: 314 Marcy Ave  
City: New York State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chef Ah Glatt Inc.**  
Address: 4810 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chez Chantal Inc.**  
Address: 305 Central Ave  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chillato Inc.**  
Address: 529 Central Avenue  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chimichurri Chicken of Carle Place**  
Address: 11 Old Country Road  
City: Carle Place State: New York Zip: 11514  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: Manhattan State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Mehlman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chimichurri Kitchen Corp.**  
Address: 450A Rockaway Turnpike  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **China Glatt Inc.**

Address: 4413 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **China Glatt Inc.**  
Address: 560 A Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chinatown Take Out**  
Address: 455 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chip N Dipped**

Address: 342 New York Avenue

City: Huntington

State: New York

Zip: 11743

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi David Saffra - Tablet K**

Address: 8 Copperbeach Lane

City: Lawrence

State: NY

Zip: 11559

Phone: 516-569-9081

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The certification is over 40 yrs old. It was started by Rabbi Refhel Saffra a musmach of YU. He received semicha from Kollel Agudath Achaim . He has been a rav hamachsir for over 20 yrs. All mashgichim are shomrei torah & yerei shamayim.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per yearly

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolate & More**  
Address: 106 Lee Avenue  
City: Brooklyn State: New York Zip: 11249  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolate Decor Inc.**

Address: 6 Quickway Rd

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolate Works Upper East Side**  
Address: 1410 Lexington Avenue  
City: New York State: New York Zip: 10124  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: Manhattan State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Melhman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolatier LLC The**  
Address: 641 Amsterdam Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Karshrus**  
Address: 276 Riverside Drive  
City: Manhattan State: NY Zip: 10025  
Phone: 212-866-3442 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mehadrin Kashrus is a community based kosher supervision agency, directed by Rabbi Avrohom Marmorstein, rabbi of Kehilas Minchas Chinuch of the Westside in Manhattan. All establishments serving meat must have a mashgiach temidi on premises. Rabbi Marmorstein is a graduate of Yeshiva of Gatehead & Beth Medrash Govoha in Lakewood N.J.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolatte Avenue J LLC**  
Address: 1354 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolatte Avenue S LLC**  
Address: 1901 Ocean Parkway  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Y. Goldberg - Vaad Hakashrus of Flatbush**  
Address: 1206 Avenue J  
City: Brooklyn State: NY Zip: 11230  
Phone: 347-203-0289 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Y. Goldberg - Vaad Hakashrus of Flatbush The Vaad Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Y. Goldberg, has extensive experience in all areas of kashrus spanning a forty year period. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolatte Inc.**  
Address: 792 Eastern Parkway  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Beth Din of Crown Heights**  
Address: 390 A Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-773-0186 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din of Crown Heights has been active since 1986. Its members are elected by the residents of Crown Heights. The Beth Din is currently spear headed by Rav Aharon Y. Schwei & Rav Yosef Y. Braun. The Vaad Hakashrus only certifies food that is pas yisroel, bishul yisroel & cholov yisroel.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolicious**  
Address: 175 Division Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chocolicious**  
Address: 525 Flushing Ave  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Choe's Blue Fruit and Vegetable Inc.**  
Address: 1926 Ave M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisrael Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**  
Describe soaking and salting process: **N/A**
5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cho-sen Garden Inc.**

Address: 6443 108th Street

City: Forest Hills

State: New York

Zip: 11375

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Chu's Meat Market**

Address: 339 Central Avenue

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kosher LA - Rabbi Jonathan Benzaquen**

Address: 3940 Loral Canyon Blvd

City: Studio City

State: CA

Zip: 91604

Phone: 310-497-6651

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi J. Benzaquen received rabbinical ordination from Midrash Sepharadi, in Israel from Harav Yacov Peretz with approbation from the former Sefardic Chief Rabbi of Israel, Rabbi Mordechai Eliyahu. Rabbi Benzaquen was a former Chaver Kollel at the Beverly Hills Sephardic Kollel and Rabbi of the Young Israel of Calabasas.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **All meat products are soaked and salted as per Beit Yosef standards. Any additional questions about the process can be directed to Rabbi Banzaquen.**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cinnacorp. Palisades**  
Address: 3426 Palisades Center Drive  
City: West Nyack State: New York Zip: 10994  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kof - K**  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cinque Corp.  
Address: 1589 2nd Avenue  
City: New York State: New York Zip: 10028  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher Certification  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher , built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ciofalo's Gourmet Foods Inc.  
Address: 1319 North Ave  
City: New Rochelle State: New York Zip: 10804  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Circa in the Country  
Address: 3 Green Avenue  
City: Woodridge State: New York Zip: 12780  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Citrus Cafe

Address: 436 Route 52

City: Woodridge

Phone: Blank

State: New York

Email: Blank

Zip: 12788

2. Name of Individual or Organization Certifying Food as Kosher: Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cobea Inc.  
Address: 368 New Hempstead Road  
City: New City State: New York Zip: 10956  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Coffee and Donuts At Elm Inc.**  
Address: 1510 Elm Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: Manhattan State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A.D. Mehlman studied in Yeshiva Brisk - in Israel under Rabbi Meir Solevichik & Beth Medrash Govoah in Lakewood, NJ. Rabbi A.D. Melhman received his semicha from Rabbi Shlomo Gissinger an expert in Jewish Law. In addition, Rabbi A.D. Mehlman had extensive training in the field of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Coffee Bar Inc.  
Address: 1904 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Coffee Break**  
Address: 683 A Myrtle Ave.  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Coffee Place Corp.  
Address: 1223 Quentin Road  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Coffee Street LLC**

Address: 5403 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11229

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cohen Meat Market Inc.  
Address: 63-71 108th Street  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisrael Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is not soaked and salted

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cohn Live Poultry Inc.**

Address: 467 Flushing Avenue

City: Brooklyn

State: New York

Zip: 11205

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Ezriel Mayer Kohn**

Address: 228 Hewes Street

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-963-2614

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Kohn is an alumnus of UTA where he had post graduate Studies for over 20 years. He is also a member of the CRC in Williamsburg. In addition, he is a rav that poskins shalos on various aspects of halacha.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cold Stone Creamery #1021**

Address: 3165 Harkness Avenue

City: Brooklyn

State: New York

Zip: 11235

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **KOA - Rabbi Shlomo Isaacson**

Address: 72 Ascension Street

City: Passaic

State: NJ

Zip: 7055

Phone: 973-777-0649

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi S. Isaacson has semicha from Rabbi E. Yolles ZT"L, Rabbi S.Z Friedman (Tenka Rov) & Rabbi C. Rabinowitz (Tosh). He has been involved in kashrus for the last 43yrs. working with organizations such as Saint Louis Vaad, OU, Kof K & CRC in Chicago.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **10** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Cong. Camp Divrei Yoel  
Address: 141 Cohen & Cohen Rd.  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Moshe Itzkowitz  
Address: 74 Ross Street  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-486-7776 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Moshe Itzkowitz received semicha from Rabbi Vosner, Riskove Rav & Rabbi Gestetner in Eretz Yisroel. In addition, he learned the laws of kashrus by the Volover Rav & is affiliated with the Vaad Hakashrus Yetev Lev of Satmar.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cong. Iched Anash**  
Address: 495 Anawana Road  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Teller**  
Address: 80 Skillman Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-598-3266 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teller is the mashgiach for Cong. Iched Anash & is well versed in Hilchos Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cong. Khal Chasidei Skware - Giti Garden Supermarket**

Address: 1123 Glenwild Rd.

City: Woodridge

State: New York

Zip: 12789

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Mendy Werzberger**

Address: 1120 Glenwild Rd.

City: Woodridge

State: NY

Zip: 12789

Phone: 845-436-1593

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mendy Werzberger learned in Yeshiva Viznitz in Bnei Brak, Israel & Yeshiva Chashan Sofer in Brooklyn, New York. In addition, he has worked at the deli counter in Brooklyn, New York.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cong. Khal Chasidei Skware - Tomer Devorah**  
Address: 1123 Glenwild Rd.  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Mendy Werzberger**  
Address: 1120 Glenwild Rd.  
City: Woodridge State: NY Zip: 12789  
Phone: 845-436-1593 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mendy Werzberger learned in Yeshiva Viznitz in Bnei Brak, Israel & Yeshiva Chashan Sofer in Brooklyn, New York. In addition, he has worked at the deli counter in Brooklyn, New York.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cong. Machne Ger**  
Address: 336 Whittaker Road  
City: S.Fallsburg State: New York Zip: 12779  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Michael Bard**  
Address: Congregation Machne Ger  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-633-1590 ext. 4 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Michael Bard learned in England & is part of the Ger community .

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Congregation Yesodei Hatorah**  
Address: 4720 New Utrecht  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Beryl Weider**  
Address: 39 Weiner Drive  
City: Monsey State: NY Zip: 10952  
Phone: 718-436-1234 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Beryl Weider is part of the Klausenberg community. Rabbi B. Weider received semicha from the Linzer Rav in 2007 & is well versed in the laws of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Continental Glatt Kosher Meat**  
Address: 80 West Street  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shimon Katz**  
Address: 17 Suzanne Drive  
City: Monsey State: NY Zip: 10952  
Phone: 845-426-2348 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Katz learned in United Talmudic Academy & Mesivta Kiryas Yoel. He received Semicha from the Bedatz of Yerusalem & Rabbi Aron Teitelbaum of Satmar. In addition, he is the Dayan of Vayoe! Moshe of Satmar & the Rav Hamachshir of the Satmar Khila & mosdos in Monsey.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Continental Meat & Deli**  
Address: 414 Flushing Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Continental Meat & Food Corp.**  
Address: 1280 43rd Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cookie and Cream Inc.**  
Address: 3841 Palisades Center Drive  
City: West Nyack State: New York Zip: 10944  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The two major halachic consultants are Rabbi Y. Belsky & Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Copley Coffee 2 LLC**  
Address: 398 Audubon Avenue  
City: New York State: New York Zip: 10033  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cork & Slice Inc.**  
Address: 447 Chestnut Street  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Corner Dairy Inc.  
Address: 4001 13th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Costco Wholesale Corp.**  
Address: 50 Overlook Blvd  
City: Nanuet State: New York Zip: 10954  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher , built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Costco Wholesale Corp.**  
Address: 976 3rd Avenue  
City: Brooklyn State: New York Zip: 11232  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Country Cool Desserts

Address: 287 E. Broadway

City: Monticello

Phone: Blank

State: New York

Email: Blank

Zip: 12701

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Country Glen Kosher Restaurant Inc.  
Address: 59 Old Country Road  
City: Carle Place State: New York Zip: 11514  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Paul Plotkin  
Address: 7205 Royal Palm Blvd  
City: Margate State: FL Zip: 33003  
Phone: 954-970-4281 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi P. Plotkin received semicha from Jewish Theological Seminary of America. In 1990, he established a Rav Hamachshir program with the Rabbinical Assembly to teach Conservative Rabbis how to certify establishments for kashruth.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Cravingz Cafe LLC**

Address: 410 Central Ave

City: Lawrence

State: New York

Zip: 11516

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crawford of Great Neck Inc.**  
Address: 2 South Station Plaza  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crawford's Espresso Bar Inc.**

Address: 424 Central Ave

City: Lawrence

State: New York

Zip: 11516

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crazy Meat Corp.**  
Address: 189-09 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crown Heights - Bunch - O- Bagels & More Inc.**  
Address: 361 Troy Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Crown Heights Meat Store Inc.

Address: 411 Troy Avenue

City: Brooklyn

State: New York

Zip: 11213

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus Crown Height Inc.

Address: 388 Kingston Avenue

City: Brooklyn

State: NY

Zip: 11213

Phone: 718-604-2500

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crown Kosher Meat Market Inc.**  
Address: 334 Albany Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crown Maple, LLC**

Address: 47 McCourt Rd

City: Dover Plains

Phone: 845-877-0640

State: New York

Email: tamar@crownmaple.com

Zip: 12522

2. Name of Individual or Organization Certifying Food as Kosher: **Earth Kosher**

Address: 1750 30th Street #613

City: Boulder

State: CO

Zip: 80301

Phone: 888-312-3559

Email: rabbiyagod1@gmail.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

I have worked with EarthKosher for several years to ensure kosher certification of Crown Maple's products and have followed their guidelines. - Tamar Roman

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 6 time(s) per yearly

4. All meat sold or served by this establishment **is not soaked and salted**

Describe soaking and salting process: **we do not certify meats, checked "not soaked" to get past the question**

5. We exclusively sell or serve kosher food? **No**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **Blank**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **Blank**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **Blank**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **Blank**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Crunchies Deli Corp.**  
Address: 13 Green Avenue  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Crust On J Inc.  
Address: 67-11 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **CSB Food Inc.**

Address: 2 Rimenov Ct.

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **D & F Kosher Fish Inc.**  
Address: 39 N. Myrtle Avenue  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Khal Toras Chaim Vitznitz**  
Address: 20 Ashel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-731-3700 Ext 1540 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Y. Steinmetz, Rabbi M. Kessler & Rabbi A. Y. Braunstein all are graduates from our yeshiva. They received heter horah & are all involved in kashrus in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **D & F Kosher Fish Inc.**

Address: 3395 Route 55

City: White Lake

State: New York

Zip: 12786

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Avrohom Horowitz**

Address: 45 Yale Drive

City: Monsey

State: NY

Zip: 10952

Phone: 914-906-5303

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Horowitz is a graduate of Viznitz in Monsey, NY. In addition to being the Rav of Eizer Lehuda a shul in Monsey, NY, he is also a certified rabbi by the New York State Department of Corrections.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Danny's Smokehouse**  
Address: 547 Kings Highway  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Datq Company

Address: 532 Central Ave

City: Cedarhurst

State: New York

Zip: 11516

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Daughters of Sarah Senior Community**  
Address: 180 Washington Ave  
City: Albany State: New York Zip: 12203  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashruth of the Capitol District**  
Address: 877 Madison Ave  
City: Albany State: NY Zip: 12208  
Phone: 518-4801530 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashruth standards for the Vaad of the Capitol District are determined by a group of lay people from member synagogues who form the lay leadership of the Vaad. The officers of the Vaad work closely with its Rav HaMachshir to ensure a well- functioning Vaad. The Rav Hamchshir is Rabbi Moshe Bomzer who has been in kashruth for over 30 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Daughters of Sarah Senior Community (Massry)**  
Address: 180 Washington Ave  
City: Albany State: New York Zip: 12203  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashruth of the Capitol District**  
Address: 877 Madison Ave  
City: Albany State: NY Zip: 12208  
Phone: 518-4801530 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashruth standards for the Vaad of the Capitol District are determined by a group of lay people from member synagogues who form the lay leadership of the Vaad. The officers of the Vaad work closely with its Rav HaMachshir to ensure a well- functioning Vaad. The Rav Hamchsir is Rabbi Moshe Bomzer who has been in kashruth for over 30 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Dazzle Pizza Inc.**  
Address: 25 Spring Valley Market Pl.  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **DDE Foods Inc.**  
Address: 181-26 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Deck Avenue J - 1410 LLC**  
Address: 1410 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Deck Coney Island**

Address: 1775 Coney Island

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Deli 52 Food Corp.**  
Address: 5120 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Deli Plus Inc.  
Address: 5721 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Delicious Monsey Inc.  
Address: 8 Remsen Ave  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Delicious Shawarma LLC**  
Address: 2005 Victory Blvd  
City: Staten Island State: New York Zip: 10314  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Wosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Didan Netzach LLC**  
Address: 10 East 48th Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Dips Inc.  
Address: 5315 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ditmas Cafe LLC**

Address: 2 Ditmas Avenue

City: Brooklyn

State: New York

Zip: 11218

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Division Mini Market Inc.

Address: 126 Division Avenue

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Moses Fleischman

Address: 51 Lee Avenue

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-344-5679

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Moses Fleischman is accustomed to the laws of Kashrus. Since his childhood he has studied in the Ultra Orthodox UTA of Satmar. He studies the talmud & Torah where the laws of kashrus are detailed. He is currently a member of the Satmar community where he continues to study the laws that pertain to kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Dixie Ave J  
Address: 1316 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Double Produce Corp.**  
Address: 330 Albany Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification- Shlomie Klein**  
Address: 330 Albany Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-774-7336 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Shlomie Klein is part of the Chabad community & follows their customs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Dougies

Address: 440 Route 52

City: Woodbourne

Phone: Blank

State: New York

Email: Blank

Zip: 12788

2. Name of Individual or Organization Certifying Food as Kosher: Orthodox Union

Address: 11 Broadway

City: New York

Phone: 212-563-4000

State: NY

Zip: 10004

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Dunkin Donuts**  
Address: 353 Amsterdam Avenue  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Bernhard Rosenberg/BEHR Kosher Supervision**  
Address: 5 Fairhill Road  
City: Edison State: NJ Zip: 8817  
Phone: 732-572-2766 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Dr. Bernhard Rosenberg was ordained by Yeshiva University, Rabbi Isaac Elchanan Theological Seminary in 1974. He has been providing kosher supervision & serving as a pulpit Rabbi since 1974 .

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Dunkin Donuts**  
Address: 1443 York Avenue  
City: New York State: New York Zip: 10075  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **DYKF Inc.**  
Address: 164-08 69th Avenue  
City: Fresh Meadows State: New York Zip: 11365  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Eliyahu Ben Haim - Beit Din Mekor Haim**  
Address: 84-31 117th Street  
City: Richmond Hill State: NY Zip: 11418  
Phone: 347-415-5681 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi E. Ben Haim is a sephardi rabbi & the Av Beit Din of Mekor Haim in Queens, NY. He was born in Israel & Studied in Yeshivat Porat Yosef . He was ordained by Rabbi Ezra Attia & very close to Rabbi Ovadia Yosef. He was a Rosh Hayeshiva in Beth Harashal & taught at Lifshitz Seminary as well as YU in NY. He is well versed in the laws of kosher supervision.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **E & B Upper Eastside Creamery LLC**  
Address: 1564A 1st Avenue  
City: New York State: New York Zip: 10028  
Phone: 917-837-6388 Email: emackandbolios181@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **KVH Kosher**  
Address: 26 Lincoln St  
City: Boston State: MA Zip: 2135  
Phone: 617-426-2139 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kosher certification arm of the Rabbinical Council of New England

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **Blank**

Describe soaking and salting process: **Blank**

5. We exclusively sell or serve kosher food? **No**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **No**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **No**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **No**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **No**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: E & I Enterprise Corp.  
Address: 65-37 99th Street  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **E & L Food Market Inc.**  
Address: 650 Bedford Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: E & T 15th Avenue Corp.

Address: 4312 15th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: East New York Kosher Corp.

Address: 589 East New York Avenue

City: Brooklyn

State: New York

Zip: 11225

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus Crown Height Inc.

Address: 388 Kingston Avenue

City: Brooklyn

State: NY

Zip: 11213

Phone: 718-604-2500

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Eastside DB 111 123 LLC (Limited)**

Address: 1571 York Avenue

City: New York

State: New York

Zip: 10028

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

State: NY

Zip: 10024

Phone: 917-405-7222

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Eastside DD 11 LLC (Limited)**

Address: 355 3rd Avenue

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10010

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Eat N Run Cafe  
Address: 2574 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Eatalyn Dairy Inc.

Address: 48 Bakertown Rd.

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Eden Food Market Inc.**  
Address: 3802 13th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Amrom Roth**  
Address: 1227 50th Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-438-6418 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Amrom Roth received his ordination from Beit din of Karlsburg. In addition Rabbi Roth has been in kashrus for the last 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Edible Arrangements #1464**  
Address: 1071 Gates Avenue  
City: Brooklyn State: New York Zip: 11221  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Edible Arrangements #707

Address: 133-22 Springfield Blvd

City: Queens

State: New York

Zip: 11414

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg

Address: 1823 53rd Street

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-232-4275

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Eileen's Special Cheese Cake

Address: 17 Cleveland Place

City: New York

State: New York

Zip: 10012

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi David Saffra - Tablet K

Address: 8 Copperbeach Ln

City: Lawrence

State: NY

Zip: 11516

Phone: 516-569-9083

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Eli's Bagel Shop Inc.  
Address: 58 N. Myrtle Ave  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Cong. Machon L'Kashrus  
Address: 29 Westside Ave  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-6632 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi M. Unger has been involved with Kashrus for over twenty five years. He certifies Ungers Fish, Dr, Praeger's Fish & Fresh & Healthy.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Elite Cafe Inc.  
Address: 72-28 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ella Burger Corp.**  
Address: 1899 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**  
Address: 1206 Avenue J  
City: Brooklyn State: NY Zip: 11230  
Phone: 347-203-0289 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vadd Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Emesen LLC.  
Address: 792 Eastern Parkway  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus Crown Height Inc.  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Emona ST**

Address: 2474 Butter Place

City: Bronx

Phone: Blank

State: New York

Email: Blank

Zip: 10461

2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**

Address: 11 Broadway

City: New York

Phone: 212-563-4000

State: NY

Zip: 10004

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Emunah Holdings C**  
Address: 1418 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **EOM Grocery Inc.**

Address: 1507 40th Street

City: Brooklyn

State: New York

Zip: 11218

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **EP & SP Foods LLC**  
Address: 1424 Elm Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Epic Culinary Distribitaion LLC**  
Address: 1860 Utica Ave  
City: Brooklyn State: New York Zip: 11234  
Phone: 718-414-2526 Email: ap@epicjj.com
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is**  
Describe soaking and salting process: **By supplier**
5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Essen Deli Inc.  
Address: 1359 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Evergreen Kosher**  
Address: 59 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Chaim Meyer Wagshal**  
Address: 25 Monsey Blvd.  
City: Monsey State: NY Zip: 10952  
Phone: 845-444-6070 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standard expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Evergreen Kosher - Uptown**

Address: 1581 Route 202

City: Pomona

State: New York

Zip: 10970

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Chaim Meyer Wagshal**

Address: 25 Monsey Blvd.

City: Monsey

State: NY

Zip: 10952

Phone: 845-444-6070

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standard expected by the chasidische consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Evergreen Kosher Meat LLC**

Address: 303 Grandview Ave

City: Monsey

Phone: blank

State: New York

Email: paylessglatt@gmail.com

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Wosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Excellent Kosher Bakery Inc.  
Address: 3008 Avenue M  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Usher Eckstein  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Exclusive Glatt Supermarket Inc.**  
Address: 66-06 99th Street  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Express Kosher Food Inc.**  
Address: 329 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Exxon on the Hill Inc.  
Address: 165 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **F & M Dagan Dairy Inc.**  
Address: 4820 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **F& H Kosher Supermarket Inc.**

Address: 120 Lee Avenue

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **F-3 Restaurant Group LLC**  
Address: 455 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fairway Like No Other Market**  
Address: 2316 12th Ave  
City: New York State: New York Zip: 10027  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kof - K**  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site **3** time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Fairway Like No Other Market

Address: 847 Pelham Parkway

City: Pelham Manor

State: New York

Zip: 10027

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kof - K

Address: 201 The Plaza

City: Teaneck

State: NJ

Zip: 7666

Phone: (201) 837-0126

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fairway Like No Other Market**  
Address: 1258 Corporate Drive  
City: Westbury State: New York Zip: 11590  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kof - K**  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Falk Bros Inc.

Address: 131 Acres Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Falko Bakery Shop Inc.

Address: 683A Myrtle Avenue

City: Brooklyn

State: New York

Zip: 11205

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fallburg Bagels LLC**

Address: 4602 16th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Fallsburg Bagels & Bakery Inc.

Address: 5692 Route 42

City: Fallsburg

Phone: Blank

State: New York

Email: Blank

Zip: 12733

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Famous Fish of Monsey**  
Address: 84 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Wettenstein**  
Address: 12 Maple Terrace  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-2491 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Tovia Wettenstein has over 20 yrs. of experience in the field of kashruth. He is the Dayan of Belez in Monsey & received semicha from Belez beis din of Israel & the Debrzin Rav.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **FBM Sales Corp.**

Address: 4702 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certified - Rabbi Avrohom Friedlander**

Address: 1157 51 Street

City: Brooklyn

Phone: 718-438-5419

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A. Freidlander learned in Chasan Soferor H.S & then went onto learn in Kollel for a number of years. He received semicha from the Madtisdorfer Rav, & Rabbi Yechezkel Roth. In addition, he is a member of the Hisachdus Harabonim - CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Feder Supermarket Inc.**

Address: 12 Hayes Court

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fers I LLC**  
Address: 400 Willis Avenue  
City: Roslyn State: New York Zip: 11577  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Asher Schechter**  
Address: 70 -17 173rd Street  
City: Flushing State: NY Zip: 11365  
Phone: 718-228-8677 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Schechter is a musmach of Yeshiva Torah Vodaath. He has served as a orthodox pulpit rabbi in Oceanside, Merrick, Long Island, Fair Lawn & Hillcrest. In addition, he is a member of Agudas HaRabonim & Young Israel Council of Rabbis. He has been involved in kashrus for more than 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fireside Holdings LLC**  
Address: 59 Rt. 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fischer Bros & Leslie Inc.**  
Address: 230 W. 72nd Street  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fish Gourmet**

Address: 239 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11206

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus D'Khal Yetev Lev D'Satmar**

Address: 181 Keap Street

City: Brooklyn

Phone: 718-338-1130

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Satmar is under the leadership of the Chief Rabbis of Satmar - Rabbi Y.C.M. Friedman, Rabbi S.L. Weinberger, Rabbi Z.L. Fulon & Rabbi C.D. Katz. They appointed Rabbi Y. Lieberman to spearhead the Kashrus division. Rabbi Y. Lieberman ensures the highest standard of kashrus for the Satmar Community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 0 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fish Net BP Inc.**  
Address: 1280 43rd Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fish Plate LLC**

Address: 140 Central Ave

City: Cedarhurst

State: New York

Zip: 11516

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fish to Dish**  
Address: 5516 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Five Town Kosher Meat Inc.**  
Address: 1324 Peninsula Blvd  
City: Hewlitt State: New York Zip: 11557  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Flagship SB Amsterdam NY LLC**  
Address: 413 Amsterdam Avenue  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Flagship SB NY LLC**  
Address: 81 Lexington Avenue  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Flatwood Pizza - Shalva 96**  
Address: 432 Main Street  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Pinchus Horowitz**  
Address: 1218 52nd Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-438-8462 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Pinchus Horowitz is known as the Custer Rav. He received semicha from Yeshivas Ponovezh in Eretz Yisroel & is the Rav of Congregation Khal Yeraim Chust of Boro Park in Brooklyn NY. In addition, he is the Director & the Rabbinic Administrator of Certified Kosher Underwriters (CKU) in Brooklyn & has been involved in kashrus since the early 1970's.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Flavors in Fallsburg**  
Address: 5206 Main Street  
City: South Fallsburg State: New York Zip: 12779  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fleigman Eatery Inc.**  
Address: 5502 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Flushing Supermarket Inc.**  
Address: 72-51 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Food Station Inc.**  
Address: 701 Bedford Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Foodland Mini Mart**  
Address: 204 Cortelyou Road  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Louis Gross**  
Address: 9 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 917-748-8913 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Louis Gross learned in Yeshiva Pupa & is affiliated with Congregation Kehilas Yaakov - Pupa. He is well versed in the laws of Kosher Law.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Forjay Eatery Corp.  
Address: 554 W. Broadway  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fortune Sushi Inc.**  
Address: 181-24 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Franczoz Bakery**

Address: 534 Grand Street

City: Brooklyn

State: New York

Zip: 11211

Phone: 718-387-4741

Email: office@franczozbakery.com

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fresh Fish N Grill Inc.**  
Address: 1280 43rd Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Freund's Sushi & Grill Inc.**  
Address: 4305 15th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi N.E. Teitelbaum - Volove**  
Address: 5808 11 Avenue  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-436-4685 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N.E. Teitelbaum learned in Satmar, Sharei Yoisher under Rabbi Kopelman & Navardik. In addition, he has practiced kashrus under the guidance of his father - the Nirbater Rav for 10 years & has been in kashrus since 1975 continuously.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **G & G Foods & Dairy Inc.**  
Address: 5025 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **G G Woodmere LLC**  
Address: 1030 Railroad Avenue  
City: Woodmere State: New York Zip: 11598  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Gabriella's Pastry Inc.

Address: 100-28 Queens Blvd

City: Rego Park

State: New York

Zip: 11375

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi David Saffra - Tablet K

Address: 8 Copperbeach Ln

City: Lawrence

State: NY

Zip: 11516

Phone: 516-569-9083

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gambos Bakery**  
Address: 432 State Route 52  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Gan Yisroel  
Address: 487 Parksville  
City: Parksville State: New York Zip: 12768  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certifying - Rabbi Shlomo Futerfas  
Address: 487 Parksville  
City: Parksville State: NY Zip: 12768  
Phone: 718-207-9848 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Shlomo Futerfas has semicha from Ohel Menachem in Crown Heights & is well educated in the laws of Kosher. He has been the cook in the camp for over 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Garden of Eat In - Corp.

Address: 1416 Avenue J

City: Brooklyn

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus

Address: 1294 East 8th Street

City: Brooklyn

State: NY

Zip: 11230

Phone: 718-951-3983

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gebeks USA INC**  
Address: 701 Bedford Avenue  
City: Brooklyn State: New York Zip: 11206  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gebeks USA INC**

Address: 153 Clymer Street

City: Brooklyn

State: New York

Zip: 11206

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gebeks USA INC**

Address: 299 Heyward Street

City: Brooklyn

State: New York

Zip: 11206

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gefen Foos Inc.**  
Address: 407 Mill Road  
City: Hewlett State: New York Zip: 11557  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ges Bakery

Address: 5115 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Geshmake Fish Corp.  
Address: 513 W. 236 Street  
City: Bronx State: New York Zip: 10403  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harobbonim of Riverdale  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gimme Coffee**  
Address: 3201 Krums Corners Rd  
City: Ithaca State: New York Zip: 14850  
Phone: 607-273-0111 Email: janet.levine@gimmecoffee.com
2. Name of Individual or Organization Certifying Food as Kosher: **Gimme Coffee**  
Address: 3201 Krums Corners Rd  
City: Ithaca State: NY Zip: 14850  
Phone: 607-273-0111 Email: janet.levine@gimmecoffee.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **GK Grill LLC**  
Address: 150 West 46th Street  
City: New York State: New York Zip: 10036  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glatt 59 LLC**  
Address: 250 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glatt 59 LLC - Rendeivous**  
Address: 250 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glatt Coney II Inc.**  
Address: 1558 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glatt Kosher Family Inc.**  
Address: 4305 18th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **GLATT KOSHER WHOLOESALERS LLC SQUARE CUT**  
Address: 251 Wallabout St  
City: Brooklyn State: New York Zip: 11206  
Phone: 347-986-7936 Email: SIMCHA@SQUARECUTMEAT.COM
2. Name of Individual or Organization Certifying Food as Kosher: **SIMCHA KLEIN**  
Address: 249 WALLABOUT STREET  
City: BROOKLYN State: NY Zip: 11206  
Phone: 347-986-7936 Email: SIMCHA@SQUARECUTMEAT.COM

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

I am a Kosher butcher for 10 years. I have recently opened up a new location under an existing account as stated above

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **As I'm in the retail side of the business, all beef and poultry come USDA sealed with kosher supervision that have all been salted and soaked at it's highest kashrus standards.**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glatt KYO Japanese Restaurant**  
Address: 419 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glatt Mart Inc.**

Address: 1205 Avenue M

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**

Address: 1206 Avenue J

City: Brooklyn

Phone: 347-203-0289

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vadd Hakashrus of Flatbush has been certifying Kosher establishmentsn this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kasrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Glauber's Bakery Inc.**  
Address: 126 Maple Avenue  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **GN Pizza Corp.**  
Address: 770 Middleneck Road  
City: Great Neck State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: GNN SQR Inc.  
Address: 566 Middleneck Rd  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **GNSZ LLC**  
Address: 1357 Fulton Street  
City: Brooklyn State: New York Zip: 11216  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gobos Cafe of Borough Park Inc**  
Address: 5424 New Utrech Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Goldberger's Grocery**  
Address: 188 Division Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yitzchok Aaron Goldberger**  
Address: 1556 53rd Avenue  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-387-7538 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Y. A. Goldberger learned & received Smicha from the Pupa Kollel on 110 Penn Street Brooklyn NY. He continues to learn at Beth Din Tzedek of Bais Hatalmud L'Horoa Karlburg.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Golden Ring Inc.**  
Address: 595 Bedford Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Goldman Grocery**  
Address: 38 Joyland Road  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Pinchas Goldman**  
Address: 38 Joyland Road  
City: Monticello State: NY Zip: 12701  
Phone: 917-569-4790 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Pinchas Goldman learned the laws of Kosher & discusses issues of kashruth with the Bobov Rav, Square Dayan & Rabbi Greenstein.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gombos Hemishe Bakery**  
Address: 432 Route 52  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gombos Hemishe Bakery**  
Address: 5230 Main Street  
City: South Fallsburg State: New York Zip: 12779  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gomzos Bake Shop**  
Address: 328 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gomzos Bake Shop**  
Address: 328 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 111213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Gotta Getta Bagel of Woodmere Inc.  
Address: 1039 Broadway  
City: Woodmere State: New York Zip: 11598  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Gourmet On J Inc.**  
Address: 1412 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Great Neck Maxell Fortune Rest. LLC**  
Address: 505 - 507 Middleneck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Greatneck Chocolate Factory LLC

Address: 24 Middleneck Road

City: Great Neck

State: New York

Zip: 11021

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi David Saffra - Tablet K

Address: 8 Copperbeach Ln

City: Lawrence

State: NY

Zip: 11516

Phone: 516-569-9083

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Green & Ackerman Pizza

Address: 216 Ross Street

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Greenfeld Benard**  
Address: 5118 - 5124 12th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Shlomie Fried**  
Address: 5118 - 5124 12th Avenue  
City: Brooklyn State: NY Zip: 11219  
Phone: 646-373-1494 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Shlomie Fried learned in UTA where he studied the laws of kosher. He has been eating kosher his whole life & feels competent in the laws of kosher.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Greenfelds LLC**  
Address: 13 Greenfeild Rd  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Greenfelds LLC**  
Address: 128 Lee Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Greenfresh Supermarket Inc.**

Address: 3711 Route 42

City: Monticello

Phone: Blank

State: New York

Email: Blank

Zip: 12701

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Grill Express Inc.**  
Address: 71-28 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Grill Time of Great Neck LLC**  
Address: 90 Middleneck RD  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Gross Bake Shop

Address: 5406 16th Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Gruber Vending Corp.  
Address: 40 Middleneck Road  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Hadar Geulah**

Address: 5914 18th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Haim Intl. Health Food Market Inc.  
Address: 141-04 77RD  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Haimoff Group Inc.  
Address: 72- 28 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Har Nof Grocery Inc.  
Address: 4607 Route 42  
City: Kiamisha Lake State: New York Zip: 12751  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certifying - Nachman Friedman  
Address: 1340 53rd Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 347-526-5367 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Nachman Friedman has been learning in rabbinical schools such as Yagdil Torah & Mesivta Bais Yisroel. he is knowledgeable with the kosher dietary laws set out in the Torah.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Harry Ungar - Wilson Poultry Market

Address: 205 Wilson Street

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hartsdale Kosher Inc.  
Address: 387 N. Central Ave  
City: Hartsdale State: New York Zip: 10530  
Phone: 914-428-5320 Email: rhdegroat1@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Dr. Bernhard Rosenberg - Behr  
Address: 5 Fairhill rd  
City: Edison State: NJ Zip: 8817  
Phone: 732-572-2766 Email: chaimdov@aol.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

ordained Yeshiva University R' Isaac Elchanan Theological Seminary 1974. Providing Kosher supervision since 1974 while serving as a pulpit rabbi .

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 12 time(s) per yearly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Hatzlacha Appetizing**  
Address: Hatzlacha Appetizing  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hatzlacha Meat Market Inc.  
Address: 2 Garfield Road  
City: Monroe State: New York Zip: 10950  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Cong. Bnai Yoel  
Address: 411 County Route 105  
City: Monroe State: NY Zip: 10950  
Phone: 845-783-1010 Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Vaad of Kashrus is under the auspices of Rabbi S. Waldman They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hatzlacha Supermarket

Address: 744 Bedford Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11205

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hatzlacha Supermarket  
Address: 80 West Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Binyamin Gruber  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hatzlocha Bakery Corp.

Address: 80 West Street

City: Monsey

State: New York

Zip: 10952

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hatzlocho Gas Inc.

Address: 425 State Route 208

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Health Peak Inc.  
Address: 5416 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Heimish Gourmet Food Inc.  
Address: 147 Division Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Binyamin Gruber  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Heshe & David Supermarket Inc.  
Address: 4510 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Binyamin Gruber  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Holtzman & Paris  
Address: 5313 13th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Home Style Family Food Inc.  
Address: 5009 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Luzer Eichenstein  
Address: 5021 16th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-633-8984 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Luzer Eichenstein received semicha from Rabbi Yecheskel Roth of Korlsburg. He works very closely with the Nirbarter Rav & is part of the Satmar community in Boro Park, NY.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hot Bagel Inc.

Address: 65 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: House Of Subs Inc.  
Address: 579B Middleneck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hungarian Bakery Inc.

Address: 17 Garfeild Road

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hunki's ECF Inc.  
Address: 338 Hempstead Avenue  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: I & D Glatt Inc.

Address: 482 Avenue P

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11223

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush

Address: 1206 Avenue J

City: Brooklyn

Phone: 347-203-0289

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vadd Hakashrus of Flatbush has been certifying Kosher establishmentsn this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kasrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: I & D Glatt Market Inc.

Address: 327 Hempstead Avenue

City: West Hempstead

Phone: Blank

State: New York

Email: Blank

Zip: 11552

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush

Address: 1206 Avenue J

City: Brooklyn

Phone: 347-203-0289

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: I & R Kosher Grocery Inc.  
Address: 65-47 99th Street  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ice Cream Center & Cafe Inc.  
Address: 4511 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ice Cream House on 36th street LLC

Address: 2 Church Avenue

City: Brooklyn

State: New York

Zip: 11218

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ice Cream House on Ave M LLC  
Address: 1725 Ave M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Usher Eckstein  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ice Cream House on Bedford LLC**  
Address: 873 Bedford Ave  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Icy Summit Treats Inc.

Address: 421 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: Orthodox Union

Address: 11 Broadway

City: New York

Phone: 212-563-4000

State: NY

Zip: 10004

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **IDP & CBW Food LLC**

Address: 2835 Nostrand Avenue

City: Brooklyn

State: New York

Zip: 11229

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**

Address: 1206 Avenue J

City: Brooklyn

State: NY

Zip: 11230

Phone: 347-203-0289

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Illes Kosher Poultry

Address: 5502 16th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Imperial Kosher Food**  
Address: 352 Roebling Street  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: IYH Deals Inc.

Address: 33 Dinev Rd

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Izzy's BBQ Inc.  
Address: 397 Troy Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher Certification  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **J & A Glatt Meat - The Prime Cut**  
Address: 431 Avenue U  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: J & Sons Bakery Corp.

Address: 1124 Avenue J

City: Brooklyn

State: New York

Zip: 11210

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Jacob's Kitchen Inc.**  
Address: 688 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jadeusa 8 Inc.  
Address: 3555 Johnson Avenue  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Jamy Capitol Partners LLC**  
Address: 509 Middleneck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: JC Meats Corp.  
Address: 5010 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Aaron Teitelbaum  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **JCA / Camp Redad**  
Address: 207 Anawana Lake Road  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Shia Kaufman**  
Address: 583 Flushing Avenue  
City: Brooklyn State: NY Zip: 11206  
Phone: 718 - 486 - 8010 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Shia Kaufman learned in yeshiva D' Satmar & Mochon Torah L'Horah & received semicha from Rabbi A.T. Wosner in Monsey, NY. He is now one of the dayanim in Williamsburg, New York.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jep of Cong. Long Island

Address: 5755 Route 42

City: Fallsburg

Phone: Blank

State: New York

Email: Blank

Zip: 12733

2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Rabbi Dovid Shenker

Address: 110 Rockaway Turnpike

City: Lawrence

Phone: 516-374-3790

State: NY

Zip: 11559

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Dovid Shenker is a musmach of Yeshiva Torah Vodaath & is well versed in the law of Kosher.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **JERSI LLC - Bagel Boss**  
Address: 400 Willis Avenue  
City: Roslyn Heights State: New York Zip: 11577  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Asher Schechter**  
Address: 70 -17 173rd Street  
City: Flushing State: NY Zip: 11365  
Phone: 718-228-8677 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Schechter is a musmach of Yeshiva Torah Vodaath. He has served as a orthodox pulpit rabbi in Oceanside, Merrick, Long Island, Fair Lawn & Hillcrest. In addition, he is a member of Agudas HaRabonim & Young Israel Council of Rabbis. He has been involved in kashrus for more than 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jerusalem Bagels Inc.  
Address: 6448 108th Street  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jewel Bagel Corp.  
Address: 6948 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jewelberg Inc.  
Address: 6944 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Jewmex Food Inc.**  
Address: 143 Washington Avenue  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jll Food Corp.  
Address: 1424 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Jil Woodbourne Corp.  
Address: Main Street  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Josef Korn Bake Shop Inc.**  
Address: 341 Central Ave  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Joseph Korn Bake Shop Inc.

Address: 4322 15th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Joseph Korn Bake Shop Inc.**

Address: 5004 16th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Joseph Korn Bake Shop Inc.

Address: 4317 18th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Joseph Korn Bake Shoppe Inc.**  
Address: 454 Bedford Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Joseph On J Inc.

Address: 1202 Avenue J

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush

Address: 1206 Avenue J

City: Brooklyn

Phone: 347-203-0289

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vadd Hakashrus of Flatbush has been certifying Kosher establishmentsn this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kasrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **JTED 46 Inc.**  
Address: 8 West 46 Street  
City: New York State: New York Zip: 10017  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **JTED 56 Inc.**  
Address: 672 Lexington Ave  
City: New York State: New York Zip: 10022  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Jus Bar LLC**  
Address: 2166 East 5th Street  
City: New York State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Jus Bar LLC**  
Address: 2184 McDonald Avenue  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Jus By Julie LLC**  
Address: 523 A Central Avenue  
City: Cedarhurst State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **JYM Pizza LLC**  
Address: 1387 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **K Art Food Inc.**  
Address: 419 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kabob Sir Inc.**  
Address: 497 Middleneck Road  
City: Great Neck State: New York Zip: 11201  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Badatz Mekor Haim - NY**  
Address: 84-31 117 Street  
City: Richmond Hill State: NY Zip: 11418  
Phone: 646-368-0412 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Eliyahu Ben - Chaim is the chief Sephardi rabbi. He is the Av Beit Din of Mekor Haim. Rabbi E. Ben-Chaim studied in Yeshivat Porat Yosef & recieved semicha from Rabbi Ezra Attia. Rabbi E. Ben-Chaim has been the spiritual leader of the Mashadi Persian Jewry since 1979. He has lectured in many Jewish schools & communities.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kaff Bakery Inc.

Address: 2914 Avenue J

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11210

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kaff Bakery Inc.  
Address: 1815 Avenue M  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kahan Grocery

Address: 268 Marcy Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Sam Lefkowitz

Address: 226 Hooper Street

City: Brooklyn

Phone: 718-384-4759

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Sam Lefkowitz is a Satmar Chosid. He learned in the United Talmudic Academy & is well versed in the laws of Kosher.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kapao II Inc.  
Address: 455 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kapao III Inc.  
Address: 1621 Route 202  
City: Pomona State: New York Zip: 10970  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kavunas Halev**  
Address: 252 Ferndale Loomis Road  
City: Liberty State: New York Zip: 12754  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi S. Lichter**  
Address: 252 Ferndale Loomis Road  
City: Liberty State: NY Zip: 12754  
Phone: 718-494-2529 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Lichter received semicha from the Kasho rav & is well versed in the halchos of kashrus. He has studied topics relating to kosher for the past 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KD Kosher Inc. - King David**  
Address: 101-10 Queens Blvd  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Badatz Mekor Haim - NY**  
Address: 84-31 117 Street  
City: Richmond Hill State: NY Zip: 11418  
Phone: 646-368-0412 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Eliyahu Ben - Chaim is the chief Sephardi rabbi. He is the Av Beit Din of Mekor Haim. Rabbi E. Ben-Chaim studied in Yeshivat Porat Yosef & recieved semicha from Rabbi Ezra Attia. Rabbi E. Ben-Chaim has been the spiritual leader of the Mashadi Persian Jewry since 1979. He has lectured in many Jewish schools & communities.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KD Kosher Inc. (Sushi)**  
Address: 101-10 Queens Blvd  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kehila Butcher Store Corp.  
Address: 1183 49th Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Wagshal - NSK  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kerestier Coffee Inc.  
Address: 419 Bedford Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Keser Shem Tov Manor Inc.

Address: 5326 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KF Retail, LLC**

Address: 137 Spruce Street

City: Cedarhurst

State: New York

Zip: 11516

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KGM Glatt Inc.**  
Address: 936 Kings Hwy  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Khal Divrei Chaim**  
Address: 86 West Shore Road  
City: Kauneonga Lake State: New York Zip: 12749  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Noach Strobel**  
Address: 1131 39 Street  
City: Brooklyn State: NY Zip: 12187  
Phone: 917-417-2986 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Noach Strobel learned in Mesivta Sanz - Klausenberg in Union City & is well versed in the halchos of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: King David Bakery Inc.  
Address: 67-03 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **King of Delancy NY Inc.**  
Address: 712 Country Road 104  
City: Loch Sheldrake State: New York Zip: 12759  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kings Highway Glatt**  
Address: 497 Kings Highway  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kings Hwy Pizza Inc.  
Address: 1626 East 16th Street  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kings Kitchen Corp.**  
Address: 934 Kings Hwy  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kingston Bake Shop**  
Address: 380 Kingston Avenue  
City: Brooklyn State: New York Zip: 11225  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Beth Din of Crown Heights**  
Address: 390 A Kingston Avenue  
City: New York State: NY Zip: 11213  
Phone: 718-773-0186 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din of Crown Heights has been active since 1986. Its members are elected by the residents of Crown Heights. The Beth Din is currently spear headed by Rav Aharon Y. Schwei & Rav Yosef Y. Braun. The Vaad Hakashrus only certifies food that is pas yisroel, bishul yisroel & cholov yisroel.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kingston Meats**  
Address: 385 Kingston Avenue  
City: Brooklyn State: New York Zip: 11225  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: New York State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kingway Pizza Inc.  
Address: 1387 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kiryas Joel Meat Market Inc.

Address: 51 Forest Road Ste. 214

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kiryas Yoel Bakery**

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kiryas Yoel Dairy Inc.

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kis Bagels Inc.  
Address: 1011 Oyster Bay Road  
City: E. Norwich State: New York Zip: 11732  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Asher Schechter  
Address: 70 -17 173rd Street  
City: Flushing State: NY Zip: 11365  
Phone: 718-228-8677 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Schechter is a musmach of Yeshiva Torah Vodaath. He has served as a orthodox pulpit rabbi in Oceanside, Merrick, Long Island, Fair Lawn & Hillcrest. In addition, he is a member of Agudas HaRabonim & Young Israel Council of Rabbis. He has been involved in kashrus for more than 25 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: KJ Deli

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KJ Grand Food Market Inc.**

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KJ Meats of Monsey**

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KJ Munch A Brunch**

Address: 11 Ruzhin Rd.

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KJ Vendors Inc.**

Address: 28 Van Buren Drive

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KL Gourmet LLC**  
Address: 308 Saddle River Rd  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Klein George & Irene**

Address: 4304 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kleins Oh Nuts Inc.  
Address: 1503 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher Certification  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KO - FRO Foods Inc.**  
Address: 4418 18th Ave  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Koffiko Inc.**  
Address: 266 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kohn's Fresh Fish**  
Address: 25 Main Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Cheskel Gold**  
Address: 92 Saddle River Road  
City: Monsey State: NY Zip: 10952  
Phone: 845-356-0933 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Cheskel Gold received semicha from Rabbi Roth - Karlsburg Rav in Brooklyn, NY. In addition, he is the rav of Sharei Chesed & has been involved in kashrus for a number of years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kollel Food Inc.**  
Address: 529 Empire Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kollel Grocery**  
Address: 176 River Road  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Jacob Rottenberg**  
Address: 1 Gorlitz Ct. #101  
City: Monroe State: NY Zip: 10950  
Phone: 845-662-1116 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Jacob Rottenberg is a Satmar Chosid. He learned in the Mesivta of London & in the United Talmudic Academy of Monroe NY.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kool Kat Soft LLC**

Address: 590 Pine Aire Drive

City: Bay Shore

State: New York

Zip: 11706

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certified - Ahmet Saygili**

Address: 590 Pine Aire Drive

City: Bay Shore

State: NY

Zip: 11706

Phone: 631-305-9157

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Ahmet Saygili has been in the food industry for 10 yrs. Ahmert has a variety of experience in the kosher & halal food market. In addition, Ahmet has done extensive reading on the kosher & halal markets from various books & publications.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kosher Bagel Hole Inc.  
Address: 1423 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Bravo Pizza**  
Address: 902 Kings Highway  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kosher Cabana Inc.  
Address: 495 Bellmore Ave  
City: East Meadow State: New York Zip: 11554  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Class Inc./ Glatt A La Carte**  
Address: 5123 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Convenience**

Address: 1304 Avenue M

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Bais Din Tzedek D' Flatbush**

Address: 1206 Ave M

City: Brooklyn

Phone: 718-974-9124

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Bais Din Tzedek D' Flatbush is spear headed by Rabbi Hirsch Shapiro who is the Av Bais Din. All the rabbis associated with the Bais Din Tzedek are top experts in the field of halacha. The yeshivos associated with the Bais Din Tzedek are Satmar, Pupa, Torah Vodaath & New Square. In addition, the Bais Din Tzedek maintains a international halachic hotline.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Corner Supermarket**  
Address: 2055 McDonald Avenue  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Asher Hachuel**  
Address: 508 Ave M  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-382-6063 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Asher Hachuel is a graduate of the Mirrer Yeshiva in Brooklyn, NY. He has been in the field of kashruth for the past 20 years in the Sephardic community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Discount LLC**

Address: 4909 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Express Staten Island LLC.**

Address: 326 Bradley Avenue

City: Staten Island

State: New York

Zip: 10314

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Fish**  
Address: 62 Reagan Rd Unit 4A  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Fish Corner**  
Address: 414 Flushing Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Food Inc.**  
Address: 90-21 63rd Drive  
City: Rego Park State: New York Zip: 11374  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Food To Go Inc.**  
Address: 485 Middleneck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Gifts Com Inc.**

Address: 27 Orchard Street #203

City: Monsey

State: New York

Zip: 10952

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Grill Inc.**  
Address: 868 Bedford Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Inn/ Shalva 96**  
Address: 432 Main Street  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Pinchus Horowitz**  
Address: 1218 52nd Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-438-8462 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Pinchus Horowitz is known as the Custer Rav. He received semicha from Yeshivas Ponovezh in Eretz Yisroel & is the Rav of Congregation Khal Yeraim Chust of Boro Park in Brooklyn NY. In addition, he is the Director & the Rabbinic Administrator of Certified Kosher Underwriters (CKU) in Brooklyn & has been involved in kashrus since the early 1970's.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Market Place Inc.**  
Address: 2442 Broadway  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Karshrus**  
Address: 276 Riverside Drive  
City: New York State: NY Zip: 10025  
Phone: 212-866-3442 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mehadrin Kashrus is a community based kosher supervision agency, directed by Rabbi Avrohom Marmorstein, rabbi of Kehilas Minchas Chinuch of the Westside in Manhattan. All establishments serving meat must have a mashgiach temidi on premises. Rabbi Marmorstein is a graduate of Yeshiva of Gatehead & Beth Medrash Govoha in Lakewood N.J.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Mart Inc.**

Address: 53 Parker

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Kosher on the Go Inc.

Address: 112 Spring Street

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: Zenta Kashrus Corp. - Rabbi B. Teitelbaum

Address: 13 Zenta Rd.

City: Monroe

Phone: 845-782-4615

State: NY

Zip: 10950

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Teitelbaum has worked in kashrus for almost 20 years. He was trained by his father Rabbi Nuchem Teitelbaum & graduated from UTA in Boro Park & Monroe. In addition, he received semicha from Rabbi Y. Weiss of Yerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Kosher Palace Inc.**  
Address: 250 E. Broadway  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KP NY Operations LLC**

Address: 99 Lexington Avenue

City: New York

State: New York

Zip: 10016

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**

Address: 1823 53rd Street

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-232-4275

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Krohn Brothers LLC**

Address: 441 Route 52

City: Woodbourne

Phone: Blank

State: New York

Email: Blank

Zip: 12788

2. Name of Individual or Organization Certifying Food as Kosher: **North American Kosher - Rabbi Aaron Simkin**

Address: 21363 Lassen Street

City: Chatsworth

Phone: 818-629-2770

State: CA

Zip: 91311

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Simkin received semicha from Yeshiva Yitzchok Elchanan (YU). He also learned in Mir in Israel & Yeshiva University of Los Angeles.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Krohn Brothers LLC**  
Address: 566 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Krusty Foods Inc.**  
Address: 442 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **KY Fish**

Address: 53 Forest Road #101

City: Monroe

State: New York

Zip: 10950

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: L & I Food Center Inc.  
Address: 98-106 Queens Blvd  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: L&K Supermarket

Address: 73 Division

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11249

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: LA Cambid LLC  
Address: 1794 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: La Cuisine Food LLC  
Address: 1911 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: La Gatte Pizza Inc.  
Address: 1324 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: La Gatte Pizza Inc.  
Address: 1324 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: La Sova Inc  
Address: 35 Jefferson Avenue  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Wagshal - NSK  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidische consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well known poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lafa Bar & Grill Inc.  
Address: 1326 Peninsula Blvd  
City: Hewlett State: New York Zip: 11557  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lapina World Inc.

Address: 414 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **LBT Foods Inc.**  
Address: 128 Cedarhurst Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: LCGY Bakery Inc.  
Address: 4809 New Utrecht Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Le Chocolat LTD - Monsey  
Address: 41 Main Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Asher May  
Address: 1 Louis Avenue  
City: Monsey State: NY Zip: 10952  
Phone: 845-352-3210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Shlomo Breslauer Tz"l was the Rav of Congregation Bais Teffilah in Monsey for the past 40 years. He learned in Torah Vodas & Bais Medrash Gevoah in Lakewood, NJ. In addition, he received semicha from his father Rabbi Yehudah Breslauer & Rabbi Newshloss of New Square. Rabbi A. May took over after Rabbi S. Bresslaur passed away in the winter of 2019.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lee Avenue Supermarket  
Address: 68 Lee Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Yisroel Lefkowitz  
Address: 35 Heyward Street  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-388-9864 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yisroel Lefkowitz learned in United Satmar Academy & is an active member in the Satmar community for the last 50 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lee Heyward Grocery Inc.  
Address: 198 Lee Avenue  
City: Brooklyn State: New York Zip: 11206  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self -Certifiying - Joseph Weinberger  
Address: 76 Morton Street  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-963-3837 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Joseph learned in Yeshiva Viznitz in Israel & is a member of Khal Tzemach Tzadik Viznitz in Williamsburg.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lee On Grill Inc.  
Address: 108 Lee Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Shmiel Berger  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lesova Corp  
Address: 126 Maple Avenue  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Moses Rosner  
Address: 15 Cedar Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-8222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Rosner recieved smicha from Rabbi Yosef Grunwald of Pupa, Rabbi Yisochor Ber Rottenberg of Voidislov & Rabbi Moshe Stern (Debricin). Rabbi Rosner has been in the field of Kashrus for more than 25 years & continues to certify establishments in the Monsey area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: LFM Fish Inc.  
Address: 208 Division Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Liberty Coca Cola LLC**  
Address: 111 Fairview Drive  
City: Elmford State: New York Zip: 10523  
Phone: 914-789-1201 Email: debralbabic@libertycoke.com
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Liberty Save Rite Supermarket Inc.

Address: 1885 Route 52

City: Liberty

State: New York

Zip: 12754

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Lipman's Kosher Market Inc.  
Address: 1482 Monroe Avenue  
City: Rochester State: New York Zip: 14618  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: BVK - Buffalo Vaad  
Address: 105 Maple Road  
City: Willamsville State: NY Zip: 14221  
Phone: 716-634-3990 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Moshe Taub received Yadin Yadin from the Lakewood Yeshiva (BMG) & was trained by Rabbi M. Levin from the COR. He is the Rav of Young Israel of Buffalo & is a member of AKO. In addition, he is a weekly columnist in the international magazine, Ami, & was awarded Rabbi of the Year in 2005.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: LK Pizza Inc.  
Address: 1885 Route 52  
City: Liberty State: New York Zip: 12754  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: LYD LLC/ Corner Cafe  
Address: 3718 Riverdale Avenue  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harobbonim of Riverdale  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **M& D Grocery Inc**  
Address: 2640 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **M&L Food Store Inc.**

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **M&S Kollel Candy Store Inc.**  
Address: 44 Jefferson Avenue  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - David Pal**  
Address: 602 Wilson Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-499-7847 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

David Pal is well versed in the laws of Kosher. He studied Kosher for a number of years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Macaron Paris  
Address: 617 West 46th Street  
City: New York State: New York Zip: 10036  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Machne Gila**  
Address: 5335 Route 55  
City: Liberty State: New York Zip: 12754  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Machnei Yaakov Yosef  
Address: 248 Kelly Bridge Road  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification -Rabbi Dovid Reichman  
Address: 248 Kelly Bridge Road  
City: Swan Lake State: NY Zip: 12783  
Phone: 347-726-1525 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Dovid Reichman is part of the New Square community. He is a rebbe in the yeshiva & the mashgiach in the kitchen for the summer camp. He learned in Shar Yosher under Rabbi Rosenbloom & received semicha from Rabbi Goldminzer.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Madanim Fish Inc.

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Madanim Supermarket Inc**  
Address: 18 Washington Ave  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Wagshal - NSK**  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidische consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Madas Woodland Inc.  
Address: 1627 Hillside Ave  
City: New Hyde Park State: New York Zip: 11040  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Main House BBQ**  
Address: 6001 Strickland Avenue  
City: Brooklyn State: New York Zip: 11234  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Main Street Bagels Inc.

Address: 72- 26 Main Street

City: Flushing

State: New York

Zip: 11367

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens

Address: 141-49 73rd Street

City: Flushing

State: NY

Zip: 11367

Phone: 718-520-9060

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Main Street Pizza**  
Address: 3711 Route 52  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Main Street Pizza**  
Address: 4682 Route 42  
City: S. Fallsburg State: New York Zip: 12779  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Main Street Salad Corp.

Address: 69-44 Main Street

City: Flushing

State: New York

Zip: 11367

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens

Address: 141-49 73rd Street

City: Flushing

State: NY

Zip: 11367

Phone: 718-520-9060

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mak Foods Corp.**  
Address: 5685 Riverdale Ave  
City: Bronx State: New York Zip: 10471  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Makolet Yerushalim Inc.**  
Address: 727 Avenue U  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - Eli Balas**  
Address: 727 Avenue U  
City: Brooklyn State: NY Zip: 11223  
Phone: 917-291-5547 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Being close to my Synagogue which is Chesed Avraham has taught me a lot in terms of kashrus. I attend prayers & I'm Shomer Shabbat. I have been in the food business for the last 10 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Maleks HCDC  
Address: 1795 Monroe Avenue  
City: Rochester State: New York Zip: 14618  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Avi Kilimnick  
Address: 1161 Monroe Ave  
City: Rochester State: NY Zip: 14620  
Phone: 585-314-3629 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Avi Kilimnick studied in Yeshiva University & recieved his ordination from there. In addition, he has over 10 yrs over kosher supervision in the Rochester community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Malimos Deli Corp.**

Address: 80-02 Surrey Place

City: Jamaica

Phone: Blank

State: New York

Email: Blank

Zip: 11432

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi David Saffra - Tablet K**

Address: 8 Copperbeach Ln

City: Lawrence

Phone: 516-569-9083

State: NY

Zip: 11516

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Tablet K is an orthodox agency that was established over 35 years ago by Rabbi Raphael Saffra. The current Rav Hamachshirim all went to Yeshiva University & are ordained by Rabbi Aharon Ziegler & Kollel Agudath Achim.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mama Shnitzel Inc.  
Address: 100 -22 67th Street  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Manche Keren Hatorah**  
Address: 408 Hamilton Road  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mordechai S. Pollak**  
Address: 408 Hamilton Road  
City: Monticello State: NY Zip: 12701  
Phone: 845-796-1324 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Mordechai Pollack is part of the Satmar community where he studied for a number of years. He received semicha from the Nitra Rov & is now practicing as a Dayan in Beth Din M'Chon La'Horah in Monsey, NY.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mandarin Chinese LLC**

Address: 106 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mandarin Express**

Address: 287 East Broadway

City: Monticello

State: New York

Zip: 12701

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Manna Kosher Pizza Inc.  
Address: 68-28 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Manns Cave LLC**  
Address: 1621 Route 202  
City: Pomona State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Maoz 71st Street**  
Address: 2047 Broadway  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Maoz Roosevelt Field**  
Address: 630 Old Country Road  
City: Garden City State: New York Zip: 11530  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Maoz TZ LLC**  
Address: 558 7th Ave  
City: New York State: New York Zip: 10018  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Maoz Union Square**

Address: 38 Union Square

City: New York

State: New York

Zip: 10003

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**

Address: 1823 53rd Street

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-232-4275

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Marav USA LLC**  
Address: 44 Spring Valley Market Place  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Marav USA LLC

Address: 1245 61st Street

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Marbia L Sova

Address: 51 Forest Rd.

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Marcy Fruit Market Corp.**  
Address: 308 Marcy Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Meilech Spitzer**  
Address: 308 Marcy Ave  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-782-6417 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Meilech Spitzer is a graduate of Yeshiva United Torah Academy & is a member of Congregation Tolath Yaakov.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Marcy Gardens Supermarket**

Address: 415 Marcy Avenue

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self-Certifying - Mordechai Weiss**

Address: 415 Marcy Ave

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-782-0726

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mordechai learned the laws of Kosher & is affiliated with the Satmar community. In addition, he worked in kashrus under the Kof K for 13 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Marcy Grocery Inc.**

Address: 287 Marcy Avenue

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self -Certifying - Chaim Lichman**

Address: 342 Marcy Avenue

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-486-0735

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Chaim learned in Yeshiva Yetev Lev & Kollel Metziumim & is part of the Satmar Community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Marj Distributors Inc.**  
Address: 1461 Weaver St.  
City: Scarsdale State: New York Zip: 10583  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Masbia of Flatbush**  
Address: 1372 Coney Island  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Masbr LLC**  
Address: 11 Broadway  
City: Brooklyn State: New York Zip: 10004  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Masgad Corp.**  
Address: 102-39 Queens Blvd  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mashuguna Max's Delicious Juices LLC**  
Address: 122 Greenwich Ave  
City: New York State: New York Zip: 10011  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**  
Address: 648 E.4th Street  
City: Brooklyn State: NY Zip: 11218  
Phone: 718-635-1037 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mastroianni Bros. Bakery**  
Address: 51 Opus Blvd.  
City: Schenectady State: New York Zip: 12306  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashruth of the Capitol District**  
Address: 877 Madison Ave  
City: Albany State: NY Zip: 12208  
Phone: 518-4801530 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashruth standards for the Vaad of the Capitol District are determined by a group of lay people from member synagogues who form the lay leadership of the Vaad. The officers of the Vaad work closely with its Rav HaMachshir to ensure a well- functioning Vaad. The Rav Hamchshir is Rabbi Moshe Bomzer who has been in kashruth for over 30 yrs.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Matto MGMT NY LLC  
Address: 8 West 46th Street  
City: New York State: New York Zip: 10036  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mazel Fish Inc.

Address: 51 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mazel Fish Inc.**

Address: 230 W. 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mazel Food LLC**  
Address: 481 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mazel V' Bracha Inc.**

Address: 18 Broadway

City: Woodridge

Phone: Blank

State: New York

Email: Blank

Zip: 12789

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mazel/Fortune 108 Restaurant Corp.**  
Address: 64-34 108-St  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mazone Grocery Inc.**

Address: 5430 16th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Meal Mart - Mendelson Food**  
Address: 14 Lee Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smicha Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Meat & Life Inc.**  
Address: 72-10 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mechel's Take Out & Deli LLC**  
Address: 421 RT 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Machon L'Kashrus**  
Address: 29 Westside Ave  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-6632 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi M. Unger has been involved with Kashrus for over twenty five years. He certifies Ungers Fish, Dr, Praeger's Fish & Fresh & Healthy.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mechy's Gourmet on J  
Address: 1412 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mega Mart LLC**

Address: 700 Myrtle

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11205

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Wosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mehadrin Meats Corp.**  
Address: 4809 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mehbisar Inc.  
Address: 75 N. Station Plaza  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mehudar Meats Poultry& More LLC**  
Address: 4013 13th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Meisners  
Address: 341 Central Ave  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Meisners Kosher Prepared Food Inc.**  
Address: 2924 Ave I  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Menchem's Delight Inc.**  
Address: 419 Bedford Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mendicino Anthony  
Address: 14 College Road  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Aron Lankry  
Address: 18 Forshay Road  
City: Monsey State: NY Zip: 10952  
Phone: 305-332-3311 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A. Lankry was ordained by the Chief Rabbinate of Israel. He served as the Rabbi of Beit Edmund J. Safra in Florida for 7 years. He now is the Rabbi of Bais Medrash Ohr Chaim in Monsey NY.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Meru Foods Food Inc.**

Address: 5410 New Utrecht

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mesivta Meor Hatorah

Address: 1069 38th Street

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Rabbi Burich Godlewsky

Address: 1151 46th Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-438-1050

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Burich Godlewsky received semicha from Rabbi Rosenblum. Rabbi B. Godlewsky is well versed with the Gemerah & Halachaic topics pertaining to kashrus. In 2009 Rabbi B. Godlewsky was hired to maintain the kashrus standard for this Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mesivta Meor Hatorah**

Address: 5556 Route 42

City: Fallsburg

Phone: Blank

State: New York

Email: Blank

Zip: 12733

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Burich Godlewsky**

Address: 1151 46th Street

City: Brooklyn

Phone: 718-438-1050

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Burich Godlewsky received semicha from Rabbi Rosenblum. Rabbi B. Godlewsky is well versed with the Gemerah & Halachaic topics pertaining to kashrus. In 2009 Rabbi B. Godlewsky was hired to maintain the kashrus standard for this Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Middleneck Foods Corp.**  
Address: 85 Middleneck RD  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Middleneck Glatt Inc.**  
Address: 501 Middleneck Rd  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Middleneck Supermarket Inc.**  
Address: 533 Middleneck Road  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mike's Italian Kitchen LLC**  
Address: 654 Amsterdam Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mikey Dubb's Frozen Custard LLC**  
Address: 1282 North Ave  
City: New Rochelle State: New York Zip: 10804  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Greenberg**  
Address: 1301 North Ave  
City: New Rochelle State: NY Zip: 10804  
Phone: 914-714-9165 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi S. Greenberg received his ordination from Rabbi Moshe Feinstein & is the rabbi of Young Israel of White Plains.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**  
Describe soaking and salting process: **N/A**
5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Milk N Honey**  
Address: 12 East 46th Street  
City: New York State: New York Zip: 10017  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Milk Street Cafe**  
Address: 40 Wall Street  
City: New York State: New York Zip: 10005  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mill Basin Kosher Deli**  
Address: 5823 Avenue T  
City: Brooklyn State: New York Zip: 11234  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mini Market Plus Inc.**  
Address: 10 Harrison Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Martin Walter**  
Address: 199 Lee Avenue  
City: Brooklyn State: NY Zip: 11211  
Phone: 917-613-9242 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Martin is a member of the Satmar Kehillah. He learned in Satmar & Beth Medrash Elyon & is well versed in kosher law.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **MJS Cohen Inc**

Address: 305 Central Ave

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **MLM Cuisine LLC**  
Address: 127 East 54th Street  
City: New York State: New York Zip: 10022  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **MMR Food Services LLC**  
Address: 1202 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **MND Gourmet Enterprises Inc.**  
Address: 63-06 Woodhaven Blvd  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Moisha's Kosher Discount Supermarket INC**  
Address: 315 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Chemed of Nitra - Rabbi M.M. Weissmandel**  
Address: 21 Park Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-352-7612 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The congregation was founded in 1947 in the USA for Hungarian Jewry. The focus was to rebuild the Nitra Jewish community. The kashrus division was formed to ensure the proper requirements (the highest standard) for the Nitra community. We currently have 7 supermarkets under our hashkacha in NY & NJ. Moshia Discount, KRM, Kosher Palace, Rubaskin, All Fresh, Shlomies Kosher World, Seasons, Brachs & Season (Passaic).

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Momi Restaurant Inc.**  
Address: 189-23 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Monsey Glatt Kosher**  
Address: 190 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Monsey Take Out of RC Inc.**  
Address: 46 Main Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Machon L'Kashrus**  
Address: 29 Westside Ave  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-6632 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi M. Unger has been involved with Kashrus for over twenty five years. He certifies Ungers Fish, Dr, Praeger's Fish & Fresh & Healthy.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Monticello Kosher Bakery**  
Address: 321 E Broadway  
City: Monticello State: New York Zip: 12701  
Phone: 718-475-1817 Email: monticellokosherbakery@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **New Square Kosher**  
Address: 8 Truman Ave  
City: New Square State: NY Zip: 10977  
Phone: 845-354-5120 Email: 354120@gmail.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

I have multiple bakeries and work with the this kosher supervision

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Morris Food Inc.**

Address: 40 Camp Morris Road

City: Woodridge

State: New York

Zip: 12789

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Mordechai Greenfield**

Address: 787 East 3rd Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-633-0262

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mordechai Greenfield has semicha from Torah Voddath.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mos Disa Corp.  
Address: 3530 Johnson Avenue  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council  
Address: 648 E.4th Street  
City: Brooklyn State: NY Zip: 11218  
Phone: 718-635-1037 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mosdos Noam Elimelch**  
Address: 22 Mount Hope Road  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Moses Peking Inc.

Address: 550713th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Moss Cafe LLC**  
Address: 3260 Johnson Avenue  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mountain Fruit of Ave M**  
Address: 1523 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mountain Kosher Food Corp**  
Address: 286 East Broadway  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Chemed of Nitra - Rabbi M.M. Weissmandel**  
Address: 21 Park Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-352-7612 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The congregation was founded in 1947 in the USA for Hungarian Jewry. The focus was to rebuild the Nitra Jewish community. The kashrus division was formed to ensure the proper requirements (the highest standard) for the Nitra community. We currently have 7 supermarkets under our hashkacha in NY & NJ. Moshia Discount, KRM, Kosher Palace, Rubaskin, All Fresh, Shlomies Kosher World, Seasons, Brachs & Season (Passaic).

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mozzarella  
Address: 264 Lee Ave  
City: Brooklyn State: New York Zip: 11206  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mozzarella NY LLC**  
Address: 608 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Mozzarella on 13th Corp.**

Address: 5114 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Mr. Nosh  
Address: 3323 Avenue N  
City: Brooklyn State: New York Zip: 11234  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **MS Food Center Corp.**  
Address: 4502 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ms Heimishe Bakery Inc.  
Address: 1321 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Munch Place Inc.**  
Address: 105 -25 64th RD  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: My Favorite Caterers Inc.  
Address: 770 Middleneck Rd  
City: Great Neck State: New York Zip: 11024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: My Harvest LLC

Address: 5 Heyward Street

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: My Most Favorite 72nd Street Corp.  
Address: 247 W. 72nd Street  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher Certification  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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KATHY HOCHUL  
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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **My Most Favorite Dessert**  
Address: 37-22 13th Street  
City: Long Island State: New York Zip: 11101  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Myrtle Plaza Grocery Inc.**  
Address: 659 Myrtle Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Joel**  
Address: 659 Myrtle Avenue  
City: Brooklyn State: NY Zip: 11205  
Phone: 917-648-8910 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Joel was raised in a warm Jewish home in Williamsburg NY. He attended UTA where he received his education & guidance for kosher law.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nady Food LLC**  
Address: 313 Kingston Avenue  
City: Brooklyn State: New York Zip: 11225  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Naim Kosher Pizza Inc.  
Address: 3904 15th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Nargila Place Inc.  
Address: 1599 York Avenue  
City: New York State: New York Zip: 10028  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Nash Trading  
Address: 97-10 Queens Blvd  
City: Rego Park State: New York Zip: 11374  
Phone: 718-757-6177 Email: info@valleyglatt.com
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment yes

Describe soaking and salting process: yes

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #1**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #2**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #3**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #4**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #5**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #6**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Natural Treats Inc.- Bazel Kosher Ice Cream Truck #7**  
Address: 272 Kingston Ave  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NBA Glatt Market Inc.**  
Address: 185-02 Union Turnpike  
City: Flushing State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Nehorai Corp.  
Address: 59 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Moses Rosner  
Address: 15 Cedar Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-8222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Rosner recieved smicha from Rabbi Yosef Grunwald of Pupa, Rabbi Yisochor Ber Rottenberg of Voidislov & Rabbi Moshe Stern (Debricin). Rabbi Rosner has been in the field of Kashrus for more than 25 years & continues to certify establishments in the Monsey area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nehorai Meir Corp.**  
Address: 459 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 1518 President Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Neil Foods Inc.  
Address: 72-27 37th Street  
City: Jackson Heights State: New York Zip: 11372  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **New 5 Town Mazel - Fortune Restaurant Corp.**  
Address: 367 Central Ave  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: New City Kosher Deli Inc.  
Address: 282 South Main Street  
City: New City State: New York Zip: 10956  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: New Jords LLC  
Address: 13 Greenfield Road  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: New Square Fish Market Inc  
Address: 14 Adams Lane  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Wagshal - NSK  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: New York Gourmet Butcher  
Address: 351 Troy Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus Crown Height Inc.  
Address: 1518 President Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Nish Nush  
Address: 41 John Street  
City: New York State: New York Zip: 10038  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nish Nush**  
Address: 88 Reade Street  
City: New York State: New York Zip: 10013  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nobel Fish LLC**

Address: 1012 E. 15th

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Noir Bakery Inc.**  
Address: 25 Cuttermill Road  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Noribar 13th Inc.**

Address: 5401 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Noribar Sushi Inc.**  
Address: 326 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 1518 President Street  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of Crown Heights uses highly qualified Rabbis such as Rabbi Avraham Osdoba & Rabbi Shlomo Segal. Rabbi A. Osdoba has been involved in kashrus for over 55 yrs. & since 1986 has been a senior member of the Beis Din of Crown Heights. At times the Vaad also uses the services of Rabbi Yosef Heller & Rabbi Yitzchok Raitport. Rabbi Berel Levertov is the kashrus administrator.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Nosh & Bagel II Inc.

Address: 5721 16th Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11202

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nosh Express Inc.**  
Address: 2817 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NS Supermarket Inc.**  
Address: 55 Jefferson  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Dovid Rosenblum**  
Address: 72 Garfield Rd  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-721-1808 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Dovid Rosenblum learned in Yeshiva of New Square. He received semicha from Merkaz Hokoliliom of New Square. He remains part of the New Square Community

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: NS Sushi LLC

Address: 343 Broadway

City: Monticello

Phone: Blank

State: New York

Email: Blank

Zip: 12701

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: nsomina Cookies 79th LLC  
Address: 405 Amsterdam Avenue  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: National Kosher Supervision  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nussy's Cuisine Inc.**  
Address: 41 Main Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nuts Factory**  
Address: 2335 New Hyde Park Avenue  
City: New Hyde Park State: New York Zip: 11042  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Nuts Factory**  
Address: 2335 New Hyde Park Avenue  
City: New Hyde Park State: New York Zip: 11042  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Nuts Galore LLC.

Address: 4710-16th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: NY Kao Sushi Inc.  
Address: 1320 East 19th Street  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NY Sea World Inc.**

Address: 5115 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11214

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NYC Froyo LLC - 16 Handles**

Address: 1569 2nd Ave

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10028

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NYC Froyo LLC - 16 Handles**

Address: 2600 Broadway

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10025

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NYC Froyo LLC - 16 Handles**

Address: 325 Amsterdam Ave

City: New York

State: New York

Zip: 10023

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

State: NY

Zip: 10024

Phone: 917-405-7222

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **NYC Froyo LLC - 16 Handles**

Address: 1161 1st Ave

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10065

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Oasis Catering Inc.**  
Address: 302 Central Ave  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Cedarhurst State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Ocean Fresh Fish Market**  
Address: 230 Route 59  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**  
Address: 16 Garfield Rd. #102  
City: Monroe State: NY Zip: 10950  
Phone: 845-774-4040 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ocean Treasures LLC

Address: 4021 18th Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11218

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oh Nuts Inc.  
Address: 1503 Ave J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oh Nuts Inc.  
Address: 4923 13th Ave  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oh Nuts Inc.  
Address: 480 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oh Nuts Inc.  
Address: 120-65 168th Street  
City: Jamaica State: New York Zip: 11434  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oh Nuts Inc.  
Address: 69 RT 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Old Willi Food**

Address: 192 Clymer Street

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Pinchus Frankel**

Address: 815 Bedford Ave

City: Brooklyn

State: NY

Zip: 11205

Phone: 347-678-2686

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Pinchus Frankel was born & raised in Kiryas Joel. He learned in the Satmar Yeshiva. He now lives in Williamsburg, NY.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Olive Tree New York Inc.  
Address: 2811 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Olympic Pita Coney Island Corp**  
Address: 1419 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oma Grill Inc.  
Address: 492 Hempstead Avenue  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Oneg Bakery  
Address: 4 Waverly Avenue  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Oneg Butcher Shop Inc.**  
Address: 45 Jefferson Ave  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Chaim Meyer Wagshal**  
Address: 25 Monsey Blvd.  
City: Monsey State: NY Zip: 10952  
Phone: 845-444-6070 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Organic Circle

Address: 1415 Ave M

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: O's Natural Food Inc.

Address: 683 Myrtle Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11205

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **OTG Eats Inc.**

Address: 3611 14th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11218

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **OZ Baking Company Inc.**  
Address: 114 Middle Neck Road  
City: Great Neck State: New York Zip: 11201  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Panini La Cafe Inc.

Address: 45 Lee Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Panino LLC**  
Address: 83 Franklin Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Panino Take Out Corp.**  
Address: 5401 13th Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Para Food Inc.**  
Address: 486 - 488 Hempstead Ave  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Paradise Fruit Inc.**

Address: 4712 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Paradise Wholesale Industries Inc.**  
Address: 560 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Park Bakery Corp.**

Address: 2926 Avenue I

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11210

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

Phone: 917-405-7222

State: NY

Zip: 10024

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Park Bakery Corp.**  
Address: 2286 Nostrand Ave  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Park East Kosher**  
Address: 1733 1st Avenue  
City: New York State: New York Zip: 10028  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kof - K**  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Park Fish Market Inc.  
Address: 458 Park Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Usher Mann  
Address: 680 Myrtle Avenue  
City: Brooklyn State: NY Zip: 11205  
Phone: 718-757-8432 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Usher Mann learned in Yeshiva Nitra & in the Satmar Kollel for 23 yrs. He was ordained by three rabbonim. Rabbi Fishel HersHKowitz, Rabbi Shulam Kraus & Rabbi Shlomo Leib Weinberger. Rabbi U. Mann is the Dayan & Rov of the Satmar Kehilah on Myrtle Avenue. In addition, he is the machbar of two seforim.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Kosher Fish Market**

Address: 1602 Avenue M

City: Brooklyn

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**

Address: 1823 53rd Street

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-232-4275

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pastrami Leasehold LLC**  
Address: 1125 Lexington Avenue  
City: New York State: New York Zip: 10075  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Jonah Phillips - Self Certification**  
Address: 1991 Broadway Apt 10 B  
City: New York State: NY Zip: 10023  
Phone: 917-359-3432 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Jonah Phillips attended Joshua Hershel School in NYC as a result is extremely familiar with Jewish & kosher protocols & law. In addition, he maintains a kosher kitchen in his private residence.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Yearly

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pastrami Queen**  
Address: 138 West 72nd Street  
City: New York State: New York Zip: 10023  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Jonah Phillips - Self Certification**  
Address: 1991 Broadway Apt 10 B  
City: New York State: NY Zip: 10023  
Phone: 917-359-3432 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Jonah Phillips attended Joshua Hershel School in NYC as a result is extremely familiar with Jewish & kosher protocols & law. In addition, he maintains a kosher kitchen in his private residence.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 3 time(s) per Yearly

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pavilion 39 LTD**  
Address: 1478 39th Street  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Payam Inc.  
Address: 32 W. 39th Street  
City: New York State: New York Zip: 10018  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Paz Place Corp.**  
Address: 2668 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yisroel Gornish**  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **PC Franchise Ventures 501 LLC**  
Address: 398 Audubon Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **PG Hospitality Inc.**  
Address: 1603 Second Avenue  
City: New York State: New York Zip: 10028  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **PGB 38 LLC**  
Address: 1572 Second Avenue  
City: New York State: New York Zip: 10028  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pier 18 Fish Market Inc.**

Address: 4904 18th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pineapple Supermarket LLC**  
Address: 20 Mezritch  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Wagshal - NSK**  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pinny's Take Out Inc.**  
Address: 5421 New Utrecht Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pita Concept Corp**  
Address: 408 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Horowitz**  
Address: 1259 42nd Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-871-2903 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Horowitz is the rav of Congregation Divrei Simcha in Brooklyn for the past forty five years. In addition he is a graduate of Beis Medrash Elyon & recieved semicha from Rabbi N. Horowitz of Monsey

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pita Hut LLC**  
Address: 212 West 80th Street  
City: New York State: New York Zip: 10024  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Karshrus**  
Address: 276 Riverside Drive  
City: New York State: NY Zip: 10025  
Phone: 212-866-3442 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mehadrin Kashrus is a community based kosher supervision agency, directed by Rabbi Avrohom Marmorstein, rabbi of Kehilas Minchas Chinuch of the Westside in Manhattan. All establishments serving meat must have a mashgiach temidi on premises. Rabbi Marmorstein is a graduate of Yeshiva of Gatehead & Beth Medrash Govoha in Lakewood N.J.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pizza & Borekas Inc.**

Address: 580 Central Ave

City: Cedarhurst

State: New York

Zip: 11516

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pizza Gourmet**  
Address: 1312 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Pizza L & M Corp.  
Address: 1568 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pizza Palace Cafe LLC**  
Address: 63-60 108th Street  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Pizza RM Inc.  
Address: 4502 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pizzabou**  
Address: 395 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Pizzal'e  
Address: 560 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Pizzamen LLC  
Address: 1701 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pop450 LLC**  
Address: 296 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Popbar**  
Address: 5 Carmine Street  
City: New York State: New York Zip: 10014  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Posner's Food Center Inc.**  
Address: 4310 15th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Prestige Bakery Inc.**

Address: 1720 Avenue M

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**

Address: 1206 Avenue J

City: Brooklyn

Phone: 347-203-0289

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vadd Hakashrus of Flatbush has been certifying Kosher establishmentsn this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kasrus. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Primavera Kosher LLC**

Address: 97 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Primavera Kosher LLC (Meat)**

Address: 97 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Prime By Ari**  
Address: 5010 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Aaron Teitelbaum**  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Prime Food Products Inc.**  
Address: 1543 Decatur Street  
City: Ridgewood State: New York Zip: 11385  
Phone: 718-388-7141 Email: esther@primefoodproductsinc.com
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **PTSG Trading LLC**

Address: 4302 14th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Pupa Kosher Butcher Corp.**  
Address: 118 Division Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Kehilah Yaakov of Pupa**  
Address: 658 Bedford Avenue  
City: Brooklyn State: NY Zip: 11249  
Phone: 347-640-3198 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Vaad Hakashrus of Pupa is a division of Beth Din of Kehilath Yaakov of Pupa. It consists of a group of Rabbis who are students of Rabbi Yosef Grunwald Zt"l. Rabbi A. Grunwald is currently the head of the organization & adheres to all of the standards of Rabbi Y. Grunwald Zt"l.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **PY Deli Bros Inc.**  
Address: 552 West 235 Street  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Yuval Dekel**  
Address: 552 West 235th Street  
City: Bronx State: NY Zip: 10463  
Phone: 718-548-4534 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yuval was born in Israel. He studied at the Kinneret school. He was taught the laws of kosher & is fluent in Hebrew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Quality Bakers of New York Inc.

Address: 89-14 130 Street

City: Richmond Hill

Phone: Blank

State: New York

Email: Blank

Zip: 11418

2. Name of Individual or Organization Certifying Food as Kosher: Orthodox Union

Address: 11 Broadway

City: New York

Phone: 212-563-4000

State: NY

Zip: 10004

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: QUALITY BAKERS OF NEW YORK INC.  
Address: 8914 130th St  
City: Richmond Hill State: New York Zip: 11418  
Phone: 718-805-3000 Email: royalbaker09@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: ORTHODOX UNION  
Address: 40 RECTOR ST  
City: NEW YORK State: ny Zip: 10006  
Phone: 212-563-4000 Email: bendelsteinny@ou.org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

the rabbi of the orthodox union gives the kosher certificate

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per monthly

4. All meat sold or served by this establishment NA

Describe soaking and salting process: n/a

5. We exclusively sell or serve kosher food? No

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? Yes
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? Yes
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? Yes
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? No

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Quality Fish Market Inc.

Address: 5021 New Utrecht Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Queens Kosher Market Inc.  
Address: 72-68 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Queens Kosher Pita Bakery Inc.  
Address: 68-34 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **R. Gross Dairy Kosher Restaurant Inc.**  
Address: 1372 Broadway  
City: New York State: New York Zip: 10018  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Rainbow Distributors Inc.**  
Address: 842 Hemstead Avenue  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kof - K**  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rainbow Paper Sales Inc.  
Address: 1482 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Baruch Teitelbaum  
Address: 13 Zenta Rd.  
City: Monroe State: NY Zip: 10950  
Phone: 845-782- 4615 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Baruch Teitelbaum is involved with Kashrus for almost 20 years. He received semicha from Rabbi Yitzchok Weiss, Rabbi Moshe Frind & Rabbi Aaron. In addition, he is trained by Rabbi Nuchem Teitelbaum & is part of the Satmar community. Teitelbaum.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rainbow Paper Sales Inc.  
Address: 1465 38th Street  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Baruch Teitelbaum  
Address: 13 Zenta Rd.  
City: Monroe State: NY Zip: 10950  
Phone: 845-782- 4615 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Baruch Teitelbaum is involved with Kashrus for almost 20 years. He received semicha from Rabbi Yitzchok Weiss, Rabbi Moshe Frind & Rabbi Aaron. In addition, he is trained by Rabbi Nuchem Teitelbaum & is part of the Satmar community. Teitelbaum.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Raleigh Hotel Operations LLC  
Address: 680 Heiden Road  
City: S. Fallsburg State: New York Zip: 12799  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Raskin's Fish Market Inc.  
Address: 320 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Binyamin Gruber  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Ravmen Style LLC  
Address: 1119 Quentin Road  
City: Brooklyn State: New York Zip: 11229  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Reb Shayalas Meals Inc.**  
Address: 380 Flushing Ave  
City: Brooklyn State: New York Zip: 11205  
Phone: 718-500-3052 Email: pepperandcoinc@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **Volova VK Kashrus**  
Address: 5808 11 ave  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-436-4685 Email: rbt@vkkosher.org>

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Volove VK Kashrus

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **We purchas the meat as already soaked and salted**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Red Food Corp.  
Address: 186-15 Union Turnpike  
City: Flushing State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Refresh Fruits & Deli**

Address: 5510 16th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

Phone: 718-437-2000

State: NY

Zip: 11239

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rego Pita 2 Inc.  
Address: 100-18 Queens Blvd  
City: Forest Hills State: New York Zip: 0  
Phone: 11375 Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rego Pita Inc.  
Address: 97-12 Queens Blvd  
City: Rego Park State: New York Zip: 0  
Phone: 11364 Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rella Cafe 400 LLC  
Address: 400 Rella Blvd  
City: Suffern State: New York Zip: 0  
Phone: 10901 Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rendezvous Cafe Inc.

Address: 2925 Avenue P

City: Brooklyn

State: New York

Zip: 0

Phone: 11229

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus

Address: 1294 East 8th Street

City: Brooklyn

State: NY

Zip: 11230

Phone: 718-951-3983

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Retro Grill Inc.  
Address: 2556 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **RF Food Inc.**  
Address: 131 Acres Road Unit 111  
City: Monroe State: New York Zip: 10950  
Phone: blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**  
Address: 16 Garfield Rd. #102  
City: Monroe State: NY Zip: 10950  
Phone: 845-774-4040 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **RGS Associates**  
Address: 3540 Johnson Avenue  
City: Bronx State: New York Zip: 10463  
Phone: blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **RGS Associates**  
Address: 3532 B Johnson Avenue  
City: Bronx State: New York Zip: 10463  
Phone: blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Riesterer's Bakeries Corp.  
Address: 282 Hempstead Avenue  
City: W. Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rinaco LLC  
Address: 1217 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Rise Wellness LLC**

Address: 455 Route 306

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Wosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Riverdale Donuts Inc.  
Address: 508 W. 259 Street  
City: Bronx State: New York Zip: 10471  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harobbonim of Riverdale  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rivkah Traube  
Address: 38 Stanton Corner Rd.  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self -Certifying - Chaim Tyberg  
Address: 1943 50th Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 845-292-6851 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Chaim is part of the Gerrer Kehilah & learned in Bobover Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Robbo Corp.  
Address: 40 Middleneck  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rockland Kosher Inc.  
Address: 27 Orchard Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi B. Polatsek  
Address: 203 Hewes Street.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-384-9294 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Our Organization gives hechsharim in many places, including NPGS in Lakewood NJ. We are affiliated with the OU, Star K, CRC, Nirebater & VK. Our masgiachim are constantly monitored & being trained for all the halchos of kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Rojita Management LLC**  
Address: 774 Amsterdam Avenue  
City: New York State: New York Zip: 10025  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Mehadrin Karshrus**  
Address: 276 Riverside Drive  
City: New York State: NY Zip: 10025  
Phone: 212-866-3442 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Mehadrin Kashrus is a community based kosher supervision agency, directed by Rabbi Avrohom Marmorstein, rabbi of Kehilas Minchas Chinuch of the Westside in Manhattan. All establishments serving meat must have a mashgiach temidi on premises. Rabbi Marmorstein is a graduate of Yeshiva of Gatehead & Beth Medrash Govoha in Lakewood N.J.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Rokim Food Inc.**

Address: 4101 16th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Shlomie Weber**

Address: 4101 16th Avenue

City: Brooklyn

State: NY

Zip: 11213

Phone: 718-436-7217

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Sholmie learned in Belz & is part of their community. He asks his shalos to the dayan of Belz.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Roman Aleksis & Glen Aleksis

Address: 1344 Peninsula Blvd

City: Hewlett

State: New York

Zip: 11557

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg

Address: 1823 53rd Street

City: Brooklyn

State: NY

Zip: 11204

Phone: 718-232-4275

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rosenfeld Fish Market Corp.

Address: 347 Willoughby Avenue

City: Brooklyn

State: New York

Zip: 11205

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Roslyn Kosher Inc.  
Address: 1044 Willis Ave  
City: Albertson State: New York Zip: 11507  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Royal Barbecue Inc.**  
Address: 106 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Cong. Machon L'Kashrus**  
Address: 29 Westside Ave  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-6632 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi M. Unger has been involved with Kashrus for over twenty five years. He certifies Ungers Fish, Dr, Praeger's Fish & Fresh & Healthy.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rubens Glatt Mart Inc.  
Address: 100-17 Queens Blvd  
City: Forest Hills State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Rubin's Grocery Inc.**

Address: 4410 15th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Yehudah P. Rubin**

Address: 1738 44th Street

City: Brooklyn

Phone: 917- 468 - 8439

State: NY

Zip: 11204

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yehudah P. Rubin is part of the the Bovov community. He asks his shalos to the Bobov Dayen.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rugelech  
Address: 80 West Street  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rugelech

Address: 421 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Rugelech  
Address: 4437 Route 42  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **S&D Restaurant Inc.**  
Address: 455 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sage Health Food Market**

Address: 769 Bedford Avenue

City: Brooklyn

State: New York

Zip: 11205

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Salad Bar Inc.**

Address: 5516 New Utrecht Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sally Sherman Food**  
Address: 300 N. Mac Questein Parkway  
City: Mt Vernon State: New York Zip: 10550  
Phone: 914-664-6262 Email: aelam@sallysbermanfoods.com
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11203  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Salute Maria Inc.  
Address: 63-61 108 St.  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sam Ryba  
Address: 42 Stanton Corner Road  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sanders Bakery of Monsey**

Address: 106 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sandwich Bar Inc.**  
Address: 71-32 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Satmar Meat Div. of Flabush  
Address: 1211 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Leibish Teitelbaum  
Address: 141 Ross Ave.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-302-6720 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 68 Forest Road

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

Phone: 718-338-1130

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 80 Lee Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11213

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

Phone: 718-338-1130

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 239 Lee Ave

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11213

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

Phone: 718-338-1130

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 823 Bedford Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11213

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

Phone: 718-338-1130

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 4525 16th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

Phone: 718-338-1130

State: NY

Zip: 11211

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 5023-25 New Utrecht Ave

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-338-1130

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 5239 Main Street

City: S. Fallsburg

State: New York

Zip: 11279

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-338-1130

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Satmar Meats**

Address: 3395 Route 55

City: White Lake

State: New York

Zip: 12786

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of Cong. Yetev Lev D'Satmar**

Address: 80 Lee Ave

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-338-1130

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Satmar Dayen, many years of experience in Kashrus.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Satmar Meats Division of BP Inc.  
Address: 4501 14th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Leibish Teitelbaum  
Address: 141 Ross Ave.  
City: Brooklyn State: NY Zip: 11211  
Phone: 718-302-6720 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi L. Teitelbaum learned in Yeshiva United Talmudic Academy in Brooklyn. He received semicha from Rabbi Aaron Teitelbaum. He has been the dayan for the past 30 years & is the rav of Congregation V' Yoel Moshe in Williamsburg, Brooklyn. In addition, he inspects slaughterhouses in NY, MN & TX.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Saucey LTD**  
Address: 1063 Broadway  
City: Woodmere State: New York Zip: 11598  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sauly's LLC  
Address: 239 Nassau Blvd  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: SBSP Corp.  
Address: 1928 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Schreiber Fruits & Vegetables**

Address: 184 Lee Ave

City: New York

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Herman Schreiber**

Address: 184 Lee Ave

City: Brooklyn

State: NY

Zip: 11211

Phone: 718-403-0344

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Herman Schreiber attended schools within the Satmar community & continues to maintain a close connection with the rebbe.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Schreiber's Home Style Bakery Inc.**  
Address: 4204 14th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Schwartz Appetizing/ Yom Tov Inc.

Address: 4824 16th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Schwartz Bros Fish Market Inc.**  
Address: 122 Franklin Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Schwartz Delight Inc.**

Address: 520 Park Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11205

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Schwartz Delight Inc.**

Address: 1371 Coney Island

City: Brooklyn

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Schwartz of Avenue L Inc.**  
Address: 3008 Avenue L  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Scotto's Cookies Inc.**  
Address: 6210 9th Ave  
City: Brooklyn State: New York Zip: 11220  
Phone: 718-438-0889 Email: sarah@scottoscookies.com
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Seasons Scarsdale

Address: 1104 Wilmot Rd

City: Scarsdale

State: New York

Zip: 10583

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens

Address: 141-49 73rd Street

City: Flushing

State: NY

Zip: 11367

Phone: 718-520-9060

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Semy Cafe LLC.**  
Address: 357 Central Ave  
City: Lawrence State: New York Zip: 11559  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sesame - Boro Park Inc.

Address: 5024 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sesame Holdings Inc.

Address: 1540 Coney Island Avenue

City: Brooklyn

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SGFW Bakers**  
Address: 5700 Ave D  
City: Brooklyn State: New York Zip: 11203  
Phone: 718-388-4031 Email: 14tauber@beigels.net
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11203  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shabat Catering LLC**

Address: 438 Nome Avenue

City: Staten Island

State: New York

Zip: 11230

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shabbos Nunay Yamoh Corp**  
Address: 417 Kingston Avenue  
City: Brooklyn State: New York Zip: 11225  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shalev ZGS Inc.**  
Address: 116 - 14 Queens Blvd  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Badatz Mekor Haim - NY**  
Address: 84-31 117 Street  
City: Richmond Hill State: NY Zip: 11418  
Phone: 646-368-0412 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Eliyahu Ben - Chaim is the chief Sephardi rabbi. He is the Av Beit Din of Mekor Haim. Rabbi E. Ben-Chaim studied in Yeshivat Porat Yosef & recieved semicha from Rabbi Ezra Attia. Rabbi E. Ben-Chaim has been the spiritual leader of the Mashadi Persian Jewry since 1979. He has lectured in many Jewish schools & communities.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sham Sweets Inc.**  
Address: 7924 16th Avenue  
City: Brooklyn State: New York Zip: 11214  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Shauly's Meal Mart/ Goldberger's Food Inc.  
Address: 1973 60th Street  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Aaron Teitelbaum  
Address: 1617 46th Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-1221 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Teitelbaum received smichain 1968 from various leading rabbonim such as Rabbi M. Feinstein & Rabbi S. Wozner. He is the Rav of Khal Yismaech Moshe Nirbator since 1983. In addition, he is the Rav Hamachshir of various slaughtering houses & certifies chlov yisroel plants & grocery stores.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Shell Kosher Inc.  
Address: 83 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Shemtov Manor Inc.

Address: 5326 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Shimion's Kosher Pizza

Address: 71-24 Main Street

City: Flushing

Phone: Blank

State: New York

Email: Blank

Zip: 11367

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens

Address: 141-49 73rd Street

City: Flushing

Phone: 718-520-9060

State: NY

Zip: 11367

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shloimy & Moshe Inc.**  
Address: 3 Railroad  
City: S. Fallsburg State: New York Zip: 12279  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Binyamin Gruber**  
Address: 122 Adar Ct.  
City: Monsey State: NY Zip: 10952  
Phone: 845-425-7516 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi B. Gruber learned in yeshiva Chsan Sofer & spent 10 years in their kollel. He received semicha from the Madesdorfer Rav, Chakvir Rav, Montivdno Rav & Bedatz Yerushulaim. He is a member of the CRC & has been working in kashrus for over 20 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Shlomie's Bakery

Address: 5104 12 Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Shlomies Choklat Inc.

Address: 13 Greenfield Rd

City: Woodridge

State: New York

Zip: 12789

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shlomies Inc.**

Address: 19 Prag Blvd

City: Monroe

Phone: Blank

State: New York

Email: Blank

Zip: 10950

2. Name of Individual or Organization Certifying Food as Kosher: **KJ Kosher/ Vaad Hakashrus of Kiryas Joel**

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shma Camp**  
Address: 169 Laymon Road  
City: Swan Lake State: New York Zip: 12783  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Binyomin Krausz**  
Address: 640 Alonzo Road  
City: Farrockaway State: NY Zip: 11691  
Phone: 516-960-6482 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Binyomin Krausz received semicha from Mesifita Tiferes Jerusalem of Staten Island - Rabbi Moshe Feinstein. In addition, he took a kashrus training course from Ner Lelef in Jerusalem, Israel in 2014.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shomer Shabes Supermarket Inc.**

Address: 5316 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shop Glatt Mart Inc.**  
Address: 172 E- Park Ave  
City: Long Beach State: New York Zip: 11561  
Phone: 516-897-8657 Email: noshinzaghi@yahoo.com
2. Name of Individual or Organization Certifying Food as Kosher: **South Shore Vaad**  
Address: 120 Long Beach Blvd  
City: Long Beach State: NY Zip: 11561  
Phone: 516-431-2404 Email: blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis that work for the Vaaad of Shouth Shore are othodox

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **daily**

4. All meat sold or served by this establishment **is on site continuously**

Describe soaking and salting process: 1

5. We exclusively sell or serve kosher food?. **Daily**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **is soaked and salted**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: SK2 Go Inc.  
Address: 992 East 15th Street  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sklyanoy Bakery Inc.**  
Address: 1321 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Skopps Supermarket Inc.**  
Address: 404 Laurel Ave  
City: Fallsburg State: New York Zip: 12733  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Slice N Spice Inc.  
Address: 306 Saddle River Road  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Slices of Willy  
Address: 314 Marcy Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Shmuel Berger  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SM Fish Corp**  
Address: 50-01 Rockaway Beach Blvd  
City: Far Rockaway State: New York Zip: 11691  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Smile N Delight Inc.  
Address: 66-18 99th Street  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Solomon Liberman  
Address: 4801 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Solomon Liberman  
Address: 4801 16th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-851-8696 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Solomon Liberman learned in chasidishe community of Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **South Side Food Plaza**

Address: 428 Bedford Avenue

City: Brooklyn

State: New York

Zip: 11249

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self -Certifying - Avrohom Rosenbaum**

Address: 428 Bedford Avenue

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-599-5505

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Aaron Rosenbaum learned the laws of Kosher & discusses issues of kashruth with the Satmar Dayan.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Soy Sauce LLC**  
Address: 68-22 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Spilman Fish Store Inc.

Address: 145 Division Avenue

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Spitzes Bakery Inc.**

Address: 657 Bedford Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11211

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - David Czigler**

Address: 123 Park Lane

City: Monsey

Phone: 718-875-1267

State: NY

Zip: 10952

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

David received his ordination from Rabbi Meyer Weissmandel & is part of the Nitra community in Monsey NY.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Spoons

Address: 2923 Avenue J

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11210

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus

Address: 1294 East 8th Street

City: Brooklyn

Phone: 718-951-3983

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Spoons of 13th Ave Inc.

Address: 5001 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Amrom Roth - Beis Din of Karlsburg

Address: 1227 50th Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-438-6418

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi A. Roth has been involved with kashrus for the last twenty years. Rabbi Roth worked in the institute of Kadasia in London & at the Eidah Hachreidis in Israel.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sprinkles Inc.**

Address: 5508 18th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sprinkles Kosher Pizza & Ice Cream**  
Address: 5672 Route 42  
City: Fallsburg State: New York Zip: 12733  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sprinkles Retail Shop Inc.**  
Address: 194 Wallabout  
City: Brooklyn State: New York Zip: 11206  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sprinkles Retail Shop Inc.**  
Address: 5210 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**  
Address: 1452 55 Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-972-2210 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SSNS Express LLC**  
Address: 1104 Wilmot Rd.  
City: Scarsdale State: New York Zip: 10583  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Steak & Sizzle LLC**  
Address: 4011 13th Avenue  
City: Brooklyn State: New York Zip: 11206  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Stern 58 Corp.

Address: 5804 16th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sternbach Holding, LLC**  
Address: 45 East 34th Street  
City: New York State: New York Zip: 10016  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sterns BP Corp.**  
Address: 1214 49th Street Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Stix Kosher Restaurant**  
Address: 101-15 Queens Blvd  
City: Forest Hills State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **is soaked and salted**  
Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Stop Wok & Roll Inc.**  
Address: 119 Cedarhurst Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Strauss Foods Inc.**  
Address: 488 Hempstead Avenue  
City: West Hempstead State: New York Zip: 11552  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Subo NY LLC**  
Address: 230 West Route 59  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sunny LLC**

Address: 4302 Ft. Hamilton

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sunrise Cafe & Dairy Restaurant Inc.  
Address: 190-21 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sunrise International LLC**  
Address: 3717 Riverdale Avenue  
City: Bronx State: New York Zip: 10463  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Super Bagel Inc.  
Address: 4704 13th Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Shloma Gruber  
Address: 1246 46th Street  
City: Brooklyn State: NY Zip: 11219  
Phone: 917-359-6848 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Shloma Gruber has done work for the following kasrus agencies. Tartikov, OU & Rabbi Binyamin Gruber .He Studied under Rabbi Yidel Gruber & Rabbi Hillel Weinberger.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Super K Fish Corp.

Address: 3914 14th Avenue

City: Brooklyn

State: New York

Zip: 11218

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sushi Fusion LLC  
Address: 613 Middle Neck  
City: Great Neck State: New York Zip: 11023  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sushi Fussion Express Inc.  
Address: 71-32a Main St.  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sushi Fussion LLC  
Address: 105-43 64th RD  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sushi K Express LLC**  
Address: 4120 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sushi Meshuga Inc.  
Address: 5115 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sushi Metsuyan on Main Street LLC**  
Address: 72-08 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sushi Spot II LLC**

Address: 426 Kingston Avenue

City: Brooklyn

State: New York

Zip: 11213

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**

Address: 388 Kingston Avenue

City: Brooklyn

State: NY

Zip: 11213

Phone: 718-604-2500

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sushi Ta'eem Corp.**  
Address: 1307 Ave J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sushi Tokyo - Queens**  
Address: 67-25 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sushi Tokyo CL Inc.  
Address: 1360 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sushi Tokyo Inc.  
Address: 627 Kings HWY  
City: Brooklyn State: New York Zip: 11223  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sushi Tokyo Lawrence LLC**

Address: 337 Central Ave

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SVA Rotzohn Inc. Camp Shalva**

Address: 101 Tunnel Hill Rd

City: South Fallsburg

State: New York

Zip: 12701

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Rabbi Mendel Goldberg**

Address: 101 Tunnel Hill Rd

City: South Fallsburg

State: NY

Zip: 12701

Phone: 347-219-8174

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Mendel Goldberg purchases all meat from Springfield or KJ poultry from Kiryas Yoel. All products in the kitchen have certifications from hamish hashkochos such as Hisachdus or Weissmandel. There are various rabbi's on staff that visit the kitchen daily to confirm Rabbi M. Goldberg is maintaining the highest standard of kosher.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sweet Expressions of Brooklyn, NY LLC**  
Address: 310 Kingston Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**  
Address: 388 Kingston Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-604-2500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Sweet-nes Enterprise Inc.  
Address: 5414 New Utrecht Avenue  
City: Brooklyn State: New York Zip: 11213  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SYT Food LLC**  
Address: 43 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tag Forty Inc**  
Address: 4102 18th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tahjer Foods Corp.**  
Address: 4320 Palisade Center Drive  
City: West Nyack State: New York Zip: 10944  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tam Eden Bakery Inc**  
Address: 31B Jefferson Avenue  
City: Spring Valley State: New York Zip: 10977  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Wagshal - NSK**  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tashbar Toras Chaim**

Address: 305 Revonah Hill Rd

City: Liberty

State: New York

Zip: 12754

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certifying - Rabbi Alexander Dembitzer**

Address: 305 Revonah Hill Rd

City: Liberty

State: NY

Zip: 12754

Phone: 845-292-5790

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Alexander Dembitzer has semicha & is well educated in the laws of Kosher.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Taste of Israel Inc.  
Address: 1322 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tauber Yecheil  
Address: 149 Lee Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Shmiel Berger  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tauber's Fish**  
Address: 149 Lee Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tauber's Fish Market Inc.  
Address: 3915 13th Avenue  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tel Aviv Kebab House LLC  
Address: 75-45 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: That Sushi Spot LLC  
Address: 3004 Avenue L  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **That Sushi Spot LLC**  
Address: 2462 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Aventura Buffet LLC**  
Address: 253 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Bakery  
Address: 1014 Willis Avenue  
City: Albeaton State: New York Zip: 11507  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Bakery  
Address: 327 S. Oyster Bay Road  
City: Plainview State: New York Zip: 11803  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Canteen 1 LLC**  
Address: 2436 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Coffee Bar Of Five Towns Inc.**

Address: 345 Central Ave

City: Lawrence

State: New York

Zip: 11559

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Coffee Bean & Tea Leaf**  
Address: 343 Gold Street  
City: Brooklyn State: New York Zip: 11201  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Star K**  
Address: 122 Slade Avenue  
City: Baltimore State: MD Zip: 21208  
Phone: 410-484-4110 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Star K is an internationally recognized kosher certification for many decades. Mashigichim are trained in the Star K policies. The rabbinic field representatives are ordained according to Orthodox practices.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Hot Spot BBQ**  
Address: 179-08 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 10 Columbus Circle

City: New York

State: New York

Zip: 10019

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 10 East 53rd Street

City: New York

State: New York

Zip: 10022

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 70 East 1st Street

City: New York

State: New York

Zip: 10003

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 73 W. 82nd Street

City: New York

State: New York

Zip: 10024

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E. 4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 87 East 42nd Street

City: New York

State: New York

Zip: 11218

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 117 Front Street

City: New York

State: New York

Zip: 11218

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 122 Greenwich Avenue

City: New York

State: New York

Zip: 10011

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 144 N. 8th Street

City: New York

State: New York

Zip: 11249

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E. 4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 151 W.34th Street - 8th Fl.

City: New York

State: New York

Zip: 10001

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 156 Prince Street

City: New York

State: New York

Zip: 10012

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 225 Liberty Street

City: New York

State: New York

Zip: 10281

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 239 Columbus Ave

City: New York

State: New York

Zip: 10023

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 250 East 54th Street

City: New York

State: New York

Zip: 10022

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 344 Amsterdam Ave

City: New York

State: New York

Zip: 10024

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 350 Amsterdam Ave

City: New York

State: New York

Zip: 10024

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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This form has been filed with the Department of Agriculture and Markets:

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**  
Address: 360 Greenwich Ave  
City: Greenwich State: Connecticut Zip: 6830  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**  
Address: 648 E.4th Street  
City: Brooklyn State: NY Zip: 11218  
Phone: 718-635-1037 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 375 Hudson Street

City: New York

State: New York

Zip: 10014

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 420 Park Avenue South

City: New York

State: New York

Zip: 10016

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 421 Hudson Street

City: New York

State: New York

Zip: 10016

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 630 9th Ave

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10036

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11218

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 1050 3rd Avenue

City: New York

State: New York

Zip: 10065

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 1296 Madison Ave

City: New York

State: New York

Zip: 10128

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 1 Park Avenue

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10016

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11218

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 1 W.22nd Street

City: New York

State: New York

Zip: 10010

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 201 E. 10th Street

City: New York

State: New York

Zip: 10003

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E. 4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 31-00 47th Ave

City: Long Island

Phone: Blank

State: New York

Email: Blank

Zip: 11101

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E. 4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11218

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 54 Murray Street

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 11107

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11218

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 65 W. 55th Street

City: New York

State: New York

Zip: 11107

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E. 4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 83 Murray Street

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 11107

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11218

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 100 10th Avenue

City: New York

State: New York

Zip: 10011

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 105 Rivington Street

City: New York

State: New York

Zip: 10002

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 124 Montagne Street

City: New York

State: New York

Zip: 11201

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site **4** time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Juice Press LLC**

Address: 129 W41 Street

City: New York

State: New York

Zip: 10036

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 203 E. 85 Street

City: New York

State: New York

Zip: 10028

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E. 4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 205 E. 92 Street

City: New York

State: New York

Zip: 10028

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E. 4th Street

City: Brooklyn

State: NY

Zip: 11218

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty years of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 207 7th Ave

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10028

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11215

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 830 3rd Ave

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 10022

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11215

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 1429 2nd Avenue

City: New York

State: New York

Zip: 10022

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11215

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 1474 3rd Ave

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 11218

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11215

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 1633 Broadway

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 11218

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

Phone: 718-635-1037

State: NY

Zip: 11215

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Juice Press LLC

Address: 250 Mott Street

City: New York

State: New York

Zip: 10012

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11215

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Kosher Chef Inc.  
Address: 5007 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Leibish Koenig  
Address: 5215 20th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 646-379-1330 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Leibish Koenig has been working in the field of kashrus for the last 30 years. He received semicha from Rabbi Moshe Feinstein. In addition, he is the Rav of Congregation of Koibersdorf

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Kosher Food Depot Inc.**  
Address: 1279 42nd Street  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Kosher Garden Inc.**  
Address: 286 E. Broadway  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kehilah Kashrus**  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Kosher Garden Inc.  
Address: 13 Greenfield Rd  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Kosher Garden Inc.  
Address: 1507 Coney Island Avenue  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Kosher Garden Market Place**

Address: 194 Wallabout

City: Brooklyn

State: New York

Zip: 11206

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The New HK Inc.

Address: 1613 2nd Ave

City: New York

State: New York

Zip: 10028

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Zev Schwarcz - International Kosher Council

Address: 648 E.4th Street

City: Brooklyn

State: NY

Zip: 11215

Phone: 718-635-1037

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The NY Flame LLC**

Address: 278 E. Broadway

City: Monticello

Phone: Blank

State: New York

Email: Blank

Zip: 12701

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Wosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Palace on Nostrand LLC  
Address: 2603 Nostrand Avenue  
City: Brooklyn State: New York Zip: 11210  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Peklach 4 You Inc.  
Address: 17 Main Street  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Steinmetz  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishel Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: The Pickle Guys Inc.  
Address: 357 Grand Street  
City: New York State: New York Zip: 10002  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Shmuel Fishelis  
Address: 500 Grand Street  
City: New York State: NY Zip: 10002  
Phone: 212-228-2429 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Shmuel Fishelis learned in Beis Medrash L' Torah V Horah. He received semicha from Rabbi Moshe Feinstein zt"l. He has been involved in kashrus for over 35 years & was the kashrus supervisor at Camp Dora Golding for 5 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Pom People Inc.**  
Address: 140 Washington Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Sauce LTD**

Address: 1063 Broadway

City: Woodmere

State: New York

Zip: 11598

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**

Address: 597 A Willow Ave

City: Brooklyn

State: NY

Zip: 11516

Phone: 516-569-4536

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Shabbos Depot**  
Address: 321 E. Broadway  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

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Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **The Tortilla Villa (dba Nummies Bakery)**  
Address: 32 Leone Lane  
City: Chester State: New York Zip: 10918  
Phone: 860-884-9466 Email: jscavo11181@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-907-9535 Email: OK.Org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tifaret Discount Inc.**

Address: 100 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Baruch Ausch**

Address: 16 Anthony Drive

City: Spring Valley

Phone: 845-821-3907

State: NY

Zip: 10977

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Baruch Ausch learned in YKY Pupa & is part of the Pupa community. He is well versed in the laws of Kosher.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tiki Inc.  
Address: 641 East Park Avenue  
City: Long Beach State: New York Zip: 11561  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tikvah AA Corp.  
Address: 105-45 64 RD  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tikvah Bazar Corp.**

Address: 71-28 Main Street

City: Flushing

Phone: Blank

State: New York

Email: Blank

Zip: 11367

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Eliyahu Ben Haim - Beit Din Mekor Haim**

Address: 84-31 117th Street

City: Richmond Hill

Phone: 347-415-5681

State: NY

Zip: 11418

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi E. Ben Haim is a sephardi rabbi & the Av Beit Din of Mekor Haim in Queens, NY. He was born in Israel & Studied in Yeshivat Porat Yosef . He was ordained by Rabbi Ezra Attia & very close to Rabbi Ovadia Yosef. He was a Rosh Hayeshiva in Beth Harashal & taught at Lifshitz Seminary as well as YU in NY. He is well versed in the laws of kosher supervision.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **TKN Foods LLC**  
Address: 5677 Riverdale Ave  
City: Bronx State: New York Zip: 10471  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harobbonim of Riverdale**  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Toast Well Done LLC**

Address: 1379 Coney Island

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Tartikov Beth Din - Rabbi Shumel Teitelbaum**

Address: 1452 55 Street

City: Brooklyn

Phone: 718-972-2210

State: NY

Zip: 11219

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Toddy's Appetizers LTD**  
Address: 436 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tops**  
Address: 3980 Maple Avenue  
City: Buffalo State: New York Zip: 14226  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **BVK - Vaad of Buffalo**  
Address: 105 Maple Road  
City: Williamsville State: NY Zip: 14221  
Phone: 716-634-3990 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Moshe Taub received Yadin Yadin from the Lakewood Yeshiva (BMG) & was trained by Rabbi M. Levin from the COR. He is the Rav of Young Israel of Buffalo & is a member of AKO. In addition, he is a weekly columnist in the international magazine, Ami, & was awarded Rabbi of the Year in 2005

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tov Li Shawarma Inc.  
Address: 6447 108th Street  
City: Forest Hills State: New York Zip: 11375  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tov Meod Inc.  
Address: 1419 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yechiel Babad  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tov Taam Inc.  
Address: 240 East 81st. Street  
City: New York State: New York Zip: 10028  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: OK Kosher Certification  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11203  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tradition Kosher Bakery**  
Address: 123 Lee Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Tradition Kosher Bakery**  
Address: 123 Lee Avenue  
City: Brooklyn State: New York Zip: 11211  
Phone: blank Email: blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Trastevere LLC**  
Address: 1391 Coney Island  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Troy Avenue Cafe LLC**

Address: 399 Troy Avenue

City: Brooklyn

State: New York

Zip: 11213

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus Crown Height Inc.**

Address: 388 Kingston Avenue

City: Brooklyn

State: NY

Zip: 11213

Phone: 718-604-2500

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Beth Din was formed in 1986. Rabbi Kalman Marlow, Rabbi Avraham Osdoba were the founding rabbonim. After Rabbi Marlow passed away Rabbi Shlomo Segal & Rabbi Yitzchok Raitport took over the rabbinic responsibilities while Rabbi Berel Levertov took over the executive duties. Several of these rabbonim received semicha from United Lubavitcher Yeshiva.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Turnpike Burger Grill Inc.  
Address: 147- 41 Union Turnpike  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Tuv Taam Fish

Address: 4801 New Utrecht Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? N/A
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: U & S Allon LLC  
Address: 3714 Riverdale Avenue  
City: Bronx State: New York Zip: 10471  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harobbonim of Riverdale  
Address: Riverdale Jewish Center - 3700 Independence Avenue  
City: Bronx State: NY Zip: 10463  
Phone: 718 -548 -1850 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A non profit organization made up of the Orthodox rabbis serving the synagogues of the Riverdale New York. The rabbis involved are graduates of Reits/ Yeshiva University with many years of kosher food training & experience.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **U Bake Corp.**  
Address: 2419 Coney Island  
City: Brooklyn State: New York Zip: 11218  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**  
Address: 270 West 84th Street  
City: New York State: NY Zip: 10024  
Phone: 917-405-7222 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site **2** time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

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Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Uncle Abies Deli on First Inc. - 2nd Avenue Deli  
Address: 1442 1st Avenue  
City: New York State: New York Zip: 10021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: United Chocolate

Address: 4801 1st Ave

City: Brooklyn

Phone: 718-788-8555

State: New York

Email: abe@uschoc.com

Zip: 11232

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Upscale Fish Inc.

Address: 126 Maple Avenue

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: V Life Inc.  
Address: 348 7th Avenue  
City: New York State: New York Zip: 10021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Veggies

Address: 5301 18th Avenue

City: New York

Phone: Blank

State: New York

Email: Blank

Zip: 11204

2. Name of Individual or Organization Certifying Food as Kosher: Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Vstrecha NY Inc.**  
Address: 98-98 Queens Blvd  
City: Rego Park State: New York Zip: 11374  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Wallabout Kosher Bakery DBA Taam Eden Bakery**  
Address: 251 Wallabout St  
City: Brooklyn State: New York Zip: 11206  
Phone: 718-475-1817 Email: wallaboutbakery@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Wagshal - NSK**  
Address: 8 Truman Avenue  
City: Spring Valley State: NY Zip: 10977  
Phone: 845-354-5120 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Certifying food according to the highest standards expected by the chasidishe consumer. Established over 40 years by Rabbi M. Neushlos (Rav of New Square). Our Rabbinic staff consists of 5 well know poskim; Rabbi Aron Goldminzer, (Av Beis Din) Rabbi Shulem Pollack, Rabbi Yehoshia Leifer, Rabbi Yitzchok Wosner, Rabbi Avrum Spitzer

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Weber's Real Kosher Meat LLC**

Address: 5114 12th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Weingarten's Fish Market Inc.**  
Address: 179 Ross Street  
City: Brooklyn State: New York Zip: 11211  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmiel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishacodus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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To Be Completed by the Department

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Wei's Dic Inc.  
Address: 190-11 Union Turnpike  
City: Fresh Meadows State: New York Zip: 11366  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Weisners FoodCenter Inc.**  
Address: 5918 18th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Weiss Kosher Bakery Inc.**  
Address: 5011 13th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11203  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **West 38 Kosher Deli Inc.**  
Address: 209 W.38th Street  
City: New York State: New York Zip: 10018  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Paul Plotkin**  
Address: 7205 Royal Palm Blvd  
City: Margate State: FL Zip: 33003  
Phone: 954-970-4281 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi P. Plotkin received semicha from Jewish Theological Seminary of America. In 1990, he established a Rav Hamachshir program with the Rabbinical Assembly to teach Conservative Rabbis how to certify establishments for kashruth.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 6 time(s) per yearly

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **West Kosher Bakery - Taam Eden**

Address: 80 West Street

City: Spring Valley

State: New York

Zip: 10977

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Westly Foods LLC**  
Address: 481 Route 306  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **WESTMEADOW CREAMERY**

Address: 251 N Comrie Ave

City: Johnstown

State: New York

Zip: 12095

Phone: 860-707-0929

Email: tom.vaughan@westmeadowfarm.com

2. Name of Individual or Organization Certifying Food as Kosher: **BELZER DAYAN**

Address: 1435 51st St.

City: Brooklyn

State: NY

Zip: 11219

Phone: 917-514-8028

Email: rabbieckstein@gmail.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

NOT APPLICABLE - WE ARE MANUFACTURING FLUID MILK PRODUCTS AND WHOLESALE TO PRIVATE LABEL CUSTOMER

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 4 time(s) per daily

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **NOT APPLICABLE - WE ARE MANUFACTURING FLUID MILK PRODUCTS AND WHOLESALE TO PRIVATE LABEL CUSTOMER**

5. We exclusively sell or serve kosher food? **No**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **No**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **No**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **No**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **No**

To Be Completed by the Department

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Westside MBV202 LLC**

Address: 687 Amsterdam Avenue

City: New York

State: New York

Zip: 10025

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **National Kosher Supervision**

Address: 270 West 84th Street

City: New York

State: NY

Zip: 10024

Phone: 917-405-7222

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Aaron Mehlman is the highly respected Rabbi of Congregation Ohav Sholom in Manhattan. He is an alumnus of Brisk (Israel) & BMG (Lakewood, NJ). He received semicha from Rabbi Forsheimer & Rabbi Shlomo Gissinger rabbonim & posekim in Lakewood, NJ.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Wheatly Kosher Restaurant Corp.  
Address: 140 Wheatly Plaza  
City: Greenvale State: New York Zip: 11548  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Paul Plotkin  
Address: 7205 Royal Palm Blvd  
City: Margate State: FL Zip: 33003  
Phone: 954-970-4281 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi P. Plotkin received semicha from Jewish Theological Seminary of America. In 1990, he established a Rav Hamachshir program with the Rabbinical Assembly to teach Conservative Rabbis how to certify establishments for kashruth.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 6 time(s) per yearly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Wild Ginger Vegetarian Kitchen NY Inc.**  
Address: 380 Broome Street  
City: New York State: New York Zip: 10013  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Zev Schwarcz - International Kosher Council**  
Address: 648 E.4th Street  
City: Brooklyn State: NY Zip: 11215  
Phone: 718-635-1037 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Zev Schwarcz is a graduate & musmach of Telsh Yeshiva in Cleveland. He has over twenty year of experience with kashrus supervision with major certifying agencies.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 4 time(s) per Yearly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Williamsburg Famous Fish Market**

Address: 326 Roebling Street

City: Brooklyn

State: New York

Zip: 11211

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Wok Tov Inc.**  
Address: 594 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Hakashrus of the Five Towns**  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Woodbourne Pizza**  
Address: 347 Broadway  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Babad**  
Address: 5207 19th Avenue  
City: Brooklyn State: NY Zip: 11204  
Phone: 347-254-4620 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Babad studied in Yeshiva Bais Hatalmud in Brooklyn & Yeshivas Brisk in Eretz Yisroel. In addition, he received smicha from the Satmar Dayan (Rabbi Roth ) & has over twenty years of experience in the field of kashrus. He also certifies various stores in the New York area.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Woodbourne Supermarket**  
Address: 8 Main Street  
City: Woodbourne State: New York Zip: 12788  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Self Certification - Ashar Goldstein**  
Address: 18 Dinev Road #102  
City: Monroe State: NY Zip: 10950  
Phone: 347-581-5538 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Ashar Goldstein lives in Monroe. He learned in United Torah Academy. He is part of the Satmar community Cong. Yetev Lev. He asked all his shalos to Rabbi Getzel Berkowitz - the Satmar Dayan.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Woodbury Kosher Meats**  
Address: 428 S. Oyster Bay Road  
City: Hicksville State: New York Zip: 11801  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Israel M. Steinberg**  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per **Monthly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Woodbury Village Kosher Restaurant**  
Address: 7971 Jericho Turnpike  
City: Woodbury State: New York Zip: 11797  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Paul Plotkin**  
Address: 7205 Royal Palm Blvd  
City: Margate State: FL Zip: 33003  
Phone: 954-970-4281 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi P. Plotkin received semicha from Jewish Theological Seminary of America. In 1990, he established a Rav Hamachshir program with the Rabbinical Assembly to teach Conservative Rabbis how to certify establishments for kashruth.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 6 time(s) per yearly

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Woodridge Kosher Pizza**  
Address: 14 Green Avenue  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Berger**  
Address: 16 Juliana Place  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-782-4541 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yeshiva U.T.A. of Williamsburg. Rabbi Berger is a member of CRC Hishadus Harrobonim. Rabbi Berger received Smicha from the Satmar Dayan (Rabbi Roth), Deberzen Rav ZT"L & the Pupa Rebbe (Rabbi Y. Grunwald) Rabbi Berger has twenty years of experience in the field of kashrus. He certifies ten - fifteen stores & various caterers in Williamsburg & Boro Park.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **World of Chantilly**  
Address: 4302 Farragut Road  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **OK Kosher Certification**  
Address: 391 Troy Avenue  
City: Brooklyn State: NY Zip: 11203  
Phone: 718- 756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Y&C Foods Inc.**  
Address: 18 Broadway  
City: Woodridge State: New York Zip: 12789  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**  
Address: 163 Parkville Avenue  
City: Brooklyn State: NY Zip: 11239  
Phone: 718-437-2000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Y&S Fish Market Inc.**  
Address: 5008 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Usher Eckstein**  
Address: 1435 51 Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-854-3030 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

All the rabbis working for our kosher dept. must have a full yeshiva background. We only certify cholov yisroel & glatt kosher meat. There is always a mashgiach temedi on site throughout processing & stores must have a Jewish person at the location at all times.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yanay Dips Inc.

Address: 178 Route 59

City: Monsey

Phone: Blank

State: New York

Email: Blank

Zip: 10952

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yeshira Letzirim Inc.

Address: 184 Hasbrouck

City: Woodbourne

State: New York

Zip: 12788

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: KJ Kosher/ Vaad Hakashrus of Kiryas Joel

Address: 16 Garfield Rd. #102

City: Monroe

State: NY

Zip: 10950

Phone: 845-774-4040

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

KJ Kashrus Division is a high - level kashrus agency. They have a team of fully trained & experienced mashgichim who supervises the local food establishments in Monroe, NY. They are trained in examining each & every ingredient, researching the process by which food items are prepared & maintaining the standard for the community.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Yeshiva & Mesivta Wiznitz of USA**  
Address: 1 Katz Road  
City: Fallsburg State: New York Zip: 12733  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Shmuel Stein**  
Address: 2 Katz Road  
City: Fallsburg State: NY Zip: 12733  
Phone: 347-628-3483 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi S. Stein learned in Yeshiva Chasan Sofer & Yeshiva Wiznitz in Bnei Berak.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yeshiva B.J.Z Dushinsky  
Address: 104 Waverley Avenue  
City: Monticello State: New York Zip: 12701  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Ischa Lieberman  
Address: 123 Union Avenue  
City: Brooklyn State: NY Zip: 11206  
Phone: 718-757-9691 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Ischa Lieberman received his training from UTA Satmar. He works as a supervisor for the Vaad Hakashrus of Satmar.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yeshiva Nachlas Tzvi D' Krula

Address: 5404 Route 42

City: Fallsburg

State: New York

Zip: 12733

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Self Certifying - Rabbi Hersh Bernstein

Address: 34 Walworth Street

City: Brooklyn

State: NY

Zip: 11205

Phone: 718-614-1482

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Hersh Bernstein has rabbinical degrees in all areas regarding kosher food. He associates with the Krula Chassidim in Williamsburg, NY. All shalos are referred to the Krula Rebbe.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yeshiva Viznitz  
Address: 168 Gibber Rd.  
City: Kiamesha Lake State: New York Zip: 12751  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Self Certification - Rabbi Moshe Kessler  
Address: 15 Maple Terrace  
City: Monsey State: NY Zip: 10952  
Phone: 845-521-9450 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Khal Torah Chaim was established 40 - 50 Yrs. ago by Viznitz. This organization services the Brooklyn & Monsey communities. They work closely with the Viznitz boys & girls schools, the Beth Din & certifies Kasruth within the Viznitz community. The leading Rabbis are Rabbi Abraham Nissan Neiman & Rabbi Moshe Kessler.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Yidel's Fresh Food Station**  
Address: 4921 12th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi N.E. Teitelbaum - Volove**  
Address: 5808 11 Avenue  
City: Brooklyn State: NY Zip: 11219  
Phone: 718-436-4685 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N.E. Teitelbaum learned in Satmar, Sharei Yoisher under Rabbi Kopelman & Navardik. In addition, he has practiced kashrus under the guidance of his father - the Nirbater Rav for 10 years & has been in kashrus since 1975 continuously.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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This form has been filed with the Department of Agriculture and Markets:

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Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yitzy's Distributor of Fine Foods Inc.  
Address: 3114 Ave J  
City: Brooklyn State: New York Zip: 11230  
Phone: 718-339-1329 Email: yitzysfoods@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **YJ Berkman Inc**  
Address: 1327 North Ave  
City: New Rochelle State: New York Zip: 10804  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Vaad Harabanim of Queens**  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: YLA Food Corp.  
Address: 1316 Avenue M  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Yisroel Gornish  
Address: 1421 Avenue O  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-376-3755 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yisroel Gornish received smicha from Rabbi Yitzchok Ruderman. He is the rav of Cong. Chizuk Hadas for over 30 years. In addition, he has sat on several Batei Dinim, currently he has one of his own. He has also been involved with kashrus for the past 30 years.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **YMC Sweets LLC**

Address: 3 Alpine

City: Chestnut Ridge

Phone: Blank

State: New York

Email: Blank

Zip: 10977

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yogurt Planet Inc.  
Address: 71-26 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yom Tov Inc.  
Address: 4824 16th Avenue  
City: Brooklyn State: New York Zip: 11204  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yoniski Caterers LLC  
Address: 72-22 Main Street  
City: Flushing State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: York Bagels Inc.  
Address: 500 East 76th Street  
City: New York State: New York Zip: 10021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: New York Kosher  
Address: 297 S. Washington Ave  
City: Bergenfeild State: NJ Zip: 7621  
Phone: 917-852-2992 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Yaakov Neiman is the Kosher administrator for New York Kosher. He received semicha from Ner Yisroel in Baltimore, MD. Rabbi Y. Neiman has been in the kashrus field since 1985.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food?. Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yossie's Fish Market Corp.

Address: 5324 13th Avenue

City: Brooklyn

State: New York

Zip: 11219

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Tartikov Beth Din - Rabbi Shumel Teitelbaum

Address: 1452 55 Street

City: Brooklyn

State: NY

Zip: 11219

Phone: 718-972-2210

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Kashrus division of Beth Din Tartikov is led by Rabbi Avrohom Teitelbaum, who is the Dean & Rosh Kollel of Tartikov. Rabbi A. Teitelbaum received semicha from the Tartikov yeshiva & has been intimately involved for the past 20 years. In addition, Rabbi Teitelbaum is well versed in monetary issues & Jewish Law. Our Mission is to bring the highest standard of kashrus to the most pious Jew.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yossif Kosher Bakery II Inc.  
Address: 64-17 108-St  
City: Forest Hills State: New York Zip: 11367  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yossi's 13 Corp.

Address: 3801 13th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11218

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yossi's 14 Corp.

Address: 4406 14th Avenue

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11219

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

Phone: 718-384-6765

State: NY

Zip: 11249

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yossi's 18 Corp.

Address: 5713 18th Avenue

City: Brooklyn

State: New York

Zip: 11204

Phone: Blank

Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress

Address: 85 Division Ave

City: Brooklyn

State: NY

Zip: 11249

Phone: 718-384-6765

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Yossi's 53 Corp.  
Address: 5304 New Utrecht Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Central Rabbinical Congress  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: YSH Avenue J Inc.  
Address: 1319 Avenue J  
City: Brooklyn State: New York Zip: 11230  
Phone: Blank Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Kehilah Kashrus  
Address: 1294 East 8th Street  
City: Brooklyn State: NY Zip: 11230  
Phone: 718-951-3983 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kehilah Kashrus was founded over 18 years ago by a group of pulpit rabbis of the Flatbush community, to provide a high standard of kashrus at the local food establishments. Each establishment has a designated Shomer Shabbos individual serving as the Mashgiach.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Yummy Kosher Grill Inc.**

Address: 1519 Avenue J

City: Brooklyn

Phone: Blank

State: New York

Email: Blank

Zip: 11230

2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Tzvi Goldberg - Vaad Hakashrus of Flatbush**

Address: 1206 Avenue J

City: Brooklyn

Phone: 718-951-8585

State: NY

Zip: 11230

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vadd Hakashrus of Flatbush has been certifying Kosher establishments in this community for over seventy years. Rabbi Tzvi Goldberg, has extensive experience in all areas of kashrus spanning a many years. All Rabbinic Field Supervisors employed by the Vaad are well trained & knowledgeable as well in all aspects of kashrus. The Vaad's goal is to provide the highest standard of kashrus supervision while helping our establishments navigate through the very complex issues that are inherent in such an endeavor.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Yummy Pizza**  
Address: 54 Route 59  
City: Monsey State: New York Zip: 10952  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Yechiel Steinmetz**  
Address: 51 Aishel Lane  
City: Monsey State: NY Zip: 10952  
Phone: 845-956-3193 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Steinmetz studied in both Viznitzyeshivas (Bnei Brak & Monsey) Kollel Emes V'Emunah & was the Rosh Kollel in Bais Medrash L'Halocha. In addition, he received semicha from Rabbi Fishele Hershkowitz (Dayan of Sanz) & has been in the field of kashrus for over 20 years,

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Yuntee Naturals**  
Address: 134 South 9th Street  
City: Brooklyn State: New York Zip: 11211  
Phone: 718-398-1000 Email: aryeeyumteenuts.com
2. Name of Individual or Organization Certifying Food as Kosher: **Central Rabbinical Congress**  
Address: 85 Division Ave  
City: Brooklyn State: NY Zip: 11249  
Phone: 718-384-6765 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

A Rabbinical organization founded in 1955 by the grand Rabbi Joel Teitelbaum of Satmar. One of the main functions are granting kosher certification by overseeing food production & certifying food establishments. The CRC

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: YYSD LLC  
Address: 598 Central Ave  
City: Cedarhurst State: New York Zip: 11516  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Hakashrus of the Five Towns  
Address: 597 A Willow Ave  
City: Brooklyn State: NY Zip: 11516  
Phone: 516-569-4536 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad Hakashrus of the Five Towns and Far Rockaway under the leadership of Rabbi Yosef Eisen is committed to servicing the Greater Five Towns community with the highest standard of Kashrus. Rabbi Eisen, a musmach of Torah Vodaath assumed the position 15 yrs. ago after serving a decade as the head of food services in the kashrus division of the OU.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per Daily

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: By supplier

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **ZA Restaurant Management LLC**  
Address: 40 Broad Steet - 2 Fl.  
City: New York State: New York Zip: 10004  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: **Orthodox Union**  
Address: 11 Broadway  
City: New York State: NY Zip: 10004  
Phone: 212-563-4000 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Orthodox Union is the largest kosher certification agency in the world. Founded in 1898, kashruth certification as of 1928. It certifies over 3,000 companies 6,000 plants in over 70 countries. The kashruth office staff is over 100 individuals 50 rabbinic coordinator & hundreds of rabbinic field representatives trained in kosher law & food technology. The major halachic consultant is Rabbi H. Schachter.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Zen Garden  
Address: 1 Great Neck Road  
City: Great Neck State: New York Zip: 11021  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Rabbi Israel M. Steinberg  
Address: 1823 53rd Street  
City: Brooklyn State: NY Zip: 11204  
Phone: 718-232-4275 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Orthodox. Beis Medrash Elyon, Monsey, NY; Yeshiva Torah Vodaas, Brooklyn, NY; a member of a national Orthodox rabbinic organization.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 2 time(s) per Monthly

4. All meat sold or served by this establishment N/A  
Describe soaking and salting process: N/A
5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Zucker Bakers  
Address: 2845 Jerusalem Avenue  
City: Wantach State: New York Zip: 11793  
Phone: Blank Email: Blank
2. Name of Individual or Organization Certifying Food as Kosher: Vaad Harabanim of Queens  
Address: 141-49 73rd Street  
City: Flushing State: NY Zip: 11367  
Phone: 718-520-9060 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

The Vaad of Queens is made of 80 orthodox rabbis in the greater Queens area. The Vaad was incorporated as a community board organization for over 55 years. The Vaad is under Rabbi Chaim Schwartz who was ordained from Yeshiva Heichel Hatorah in Jerusalem.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Weekly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Bakery City LLC**  
Address: 10-41 45th Avenue  
City: Long Island State: New York Zip: 11101  
Phone: 718-392-8514 Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: **Kof - K**  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Hanan Products Company Inc.  
Address: 196 Miller Place  
City: Hicksville State: New York Zip: 11801  
Phone: 516-938-1000 Ext 109 Email: mgroel@hananproducts.com
2. Name of Individual or Organization Certifying Food as Kosher: Kof - K  
Address: 201 The Plaza  
City: Teaneck State: NJ Zip: 7666  
Phone: (201) 837-0126 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Kof - K is directed by a staff of Kosher food production specialist, each an expert in various aspects of the food industry. Kof - K has an international network of regional coordinators and rabbinic representatives, all of them strictly Orthodox in their personal practice and synagogue affiliation.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment N/A

Describe soaking and salting process: N/A

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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---

Department Representative

---

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Liebman's Deli  
Address: 472 Ashford Ave  
City: Ardsley State: New York Zip: 10502  
Phone: 914-231-6222 Email: Blank

2. Name of Individual or Organization Certifying Food as Kosher: Self Certified  
Address: 472 Ashford Ave  
City: Ardsley State: NY Zip: 10502  
Phone: 914-231-6222 Email: Yuval Dekel

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Yuval is a Israeli born citizen. Yuval attended Hebrew School for most of his childhood & was taught about the laws of kosher.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per Monthly

4. All meat sold or served by this establishment is soaked and salted

Describe soaking and salting process: after slaughter, the flesh is inspeced & soaked in salt water solution, cleaning the meat & drawing out the blood.

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: Moldova pickles  
Address: 1060 E 46th St  
City: Brooklyn State: New York Zip: 11203  
Phone: 718-284-2220 Email: Moldovapickles@yahoo.com

2. Name of Individual or Organization Certifying Food as Kosher: Don Yoel levy  
Address: 391 Troy ave  
City: Brooklyn State: Ny Zip: 11213  
Phone: 718-756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 8 time(s) per weekly

4. All meat sold or served by this establishment NA

Describe soaking and salting process: Na

5. We exclusively sell or serve kosher food? Yes

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? N/A
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? N/A
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? N/A
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? N/A

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February 16, 2024

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Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Fress LLC DBA La Sova**

Address: 1301 East 13th Street

City: Brooklyn

State: New York

Zip: 11203

Phone: 646-725-2914

Email: [yonatan@la-sova.com](mailto:yonatan@la-sova.com)

2. Name of Individual or Organization Certifying Food as Kosher: **Kashrus Division of Cong. Kahal Tarnipol - Rabbi Naftali Babad**

Address: 163 Parkville Avenue

City: Brooklyn

State: NY

Zip: 11239

Phone: 718-437-2000

Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi N. Babad learned in Beth Medrash Govoha - Lakewood, NJ. He received Smicha from Rabbi Yitzchok Yaakov Weiss ZT"L Chief Rabbi of Yerushalmim, Rabbi Shumel Vosner & Rabbi Karelitz. Rabbi Babad is a posek for over twenty years, Rav & Rosh Bais Din of Tarnopol Kehila. In addition he is also a member of the CRC.

3. The certifying individual or organization visits this establishment is continuously on site:

OR

Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

To Be Completed by the Department

This form has been filed with the Department of Agriculture and Markets:

February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Sababa Bakery**  
Address: 540 Kings Hwy  
City: Brooklyn State: New York Zip: 11223  
Phone: 718-382-1100 Email: sababak@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **OK**  
Address: 391 Troy ave  
City: Brooklyn State: NY Zip: 11213  
Phone: 718-756-7500 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Since 1935 OK Kosher has been well regarded for its unique approach to kosher certification, technology and innovation in the continually evolving food and beverage industry. OK Kosher means the highest standard of kosher, built on a deep level of trust between manufacture, producers and consumers.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **Na**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Vassar College - Gordon Commons Dinning Hall Kosher Kitchen**  
Address: 124 Raymond  
City: Poughkeepsie State: New York Zip: 12604  
Phone: 845-437-7000 Email: Stephen.Scardina@cafebonappetit.com
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Dr. Neal Loevinger**  
Address: 6 Fulton Court  
City: Poughkeepsie State: NY Zip: 12603  
Phone: 845-249-9333 Email: Blank

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Neal Joseph Loevinger received a Master's in Rabbinic Studies and ordination at the Ziegler School of Rabbinic Studies, Los Angeles, in 1999. Since then he has been a member of the Rabbinical Assembly (Conservative). He also holds a Doctor of Ministry Degree from Hartford seminary and is a Board Certified Chaplain with Neshama: Association of Jewish Chaplains, which he has served as an officer and Board member. In 2007, Rabbi Loevinger was certified as a kosher supervisor by the Rabbinical Assembly (Conservative) after completing training offered by the Rabbinical Assembly and the Jewish Theological Seminary. He has supervised synagogue kitchens, bakeries and the kosher kitchen at the Vassar College All-Campus Dining Hall since arriving in Poughkeepsie in 2006.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Daily**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **Yes**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **Yes**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **Yes**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **No**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shloms Heimish Corp**  
Address: 430 Avenue P  
City: Brooklyn State: New York Zip: 11223  
Phone: 718-998-7530 Email: shlomiesbakeshop@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **Shloms Heimish Corp**  
Address: Po Box 190276  
City: brooklyn State: NY Zip: 11219  
Phone: 718-633-2209 Email: am@shlomiesbakeshop.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

We have the Hisachdus Harabunim Kosher Certificate

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Shloms Heimish Corp**  
Address: 5104 12th Avenue  
City: Brooklyn State: New York Zip: 11219  
Phone: 718-998-7530 Email: shlomiesbakeshop@gmail.com
2. Name of Individual or Organization Certifying Food as Kosher: **Shloms Heimish Corp**  
Address: Po Box 190276  
City: brooklyn State: NY Zip: 11219  
Phone: 718-633-2209 Email: am@shlomiesbakeshop.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

We have the Hisachdus Harabunim Kosher Certificate

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Monthly**

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date





# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Great American Cookies**  
Address: 3841 Palisades Center Dr  
City: West Nyack State: New York Zip: 10994  
Phone: 845-850-1313 Email: jamie@greatamerican cookies.org

2. Name of Individual or Organization Certifying Food as Kosher: **Jamie Arkley**  
Address: 3841 Palisades Center Drive  
City: West Nyack State: NY Zip: 10994  
Phone: 845-850-1313 Email: jamie@greatamericancookies.org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Re-certifying from last year

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment **NA**

Describe soaking and salting process: **No meats.**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SIG MEAT LLC**  
Address: 58 Lee Ave  
City: Brooklyn State: New York Zip: 11211  
Phone: 718-599-1212 Email: billing@satmarmeatsw.com
2. Name of Individual or Organization Certifying Food as Kosher: **Rabbi Benzion Loeb**  
Address: 4 Lynch St. #6-L  
City: BROOKLYN State: NY Zip: 11205  
Phone: 718-599-1212 Email: billing@satmarmeatsw.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Bentzion Loeb Learned in Yeshiva of United Talmudic Academy in Kiryas Joel. He received Semicha from Rabbi Aaron Teitelbaum. He is a Dayan for the past 20 year and a Rav of Yishmach Moshe Shul in Williamsburg.

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **By Supplier**

5. We exclusively sell or serve kosher food? **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

---

Department Representative

---

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SIG MEAT LLC.**  
Address: 285 Lee Ave  
City: Brooklyn State: New York Zip: 11206  
Phone: 718-599-1212 Email: billing@satmar meatsw.com
2. Name of Individual or Organization Certifying Food as Kosher: **Benzion Loeb**  
Address: 4 Lynch St. #6-L  
City: BROOKLYN State: NY Zip: 11205  
Phone: 718-599-1212 Email: billing@satmar meatsw.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Bentzion Loeb Learned in Yeshiva of United Talmudic Academy in Kiryas Joel. He received Semicha from Rabbi Aaron Teitelbaum. He is a Dayan for the past 20 year and a Rav of Yishmach Moshe Shul in Williamsburg

3. The certifying individual or organization visits this establishment is continuously on site:  
OR

Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **by suppliers**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **SIG MEAT LLC.**  
Address: 684 Myrtle Avenue  
City: Brooklyn State: New York Zip: 11205  
Phone: 718-599-1212 Email: billing@satmarmeatsw.com
2. Name of Individual or Organization Certifying Food as Kosher: **Benzion Loeb**  
Address: 4 Lynch St. #6-L  
City: BROOKLYN State: NY Zip: 11205  
Phone: 718-599-1212 Email: billing@satmarmeatsw.com

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Rabbi Bentzion Loeb Learned in Yeshiva of United Talmudic Academy in Kiryas Joel. He received Semicha from Rabbi Aaron Teitelbaum. He is a Dayan for the past 20 year and a Rav of Yishmach Moshe Shul in Williamsburg

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **weekly**

4. All meat sold or served by this establishment **is soaked and salted**

Describe soaking and salting process: **by supplier**

5. We exclusively sell or serve kosher food?. **Yes**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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# Agriculture and Markets

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Governor

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment: **Guayaki SRP**  
Address: 6782 Sebastopol Ave Suite 100  
City: Sebastopol State: CA Zip: 95472  
Phone: 888-482-9254 Email: carrie.hendrickson@guayaki.com

2. Name of Individual or Organization Certifying Food as Kosher: **KSA**  
Address: 1801 La Cienega Blvd  
City: Los Angeles State: CA Zip: 90035  
Phone: 310-282-0444 Email: certification@ksakosher.org

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

Guayaki uses copacker facilities to manufacture our product. Those facilities are either Kosher certified or registered with the KSA

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site 1 time(s) per **Yearly**

4. All meat sold or served by this establishment **N/A**

Describe soaking and salting process: **N/A**

5. We exclusively sell or serve kosher food? **N/A**

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods? **N/A**
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods? **N/A**
- c. Are all utensils and equipment clearly identified as kosher or nonkosher? **N/A**
- d. Are Nonkosher products mixed with kosher products and then sold as kosher? **N/A**

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February 16, 2024

Department Representative

Date



# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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Department Representative

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Date



# Agriculture and Markets

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Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

Establishment selling and serving both kosher and nonkosher food must complete the following:

- a. Are separate ovens and sinks for kosher and nonkosher foods?
- b. Are separate utensils, refrigerators, freezers and storage areas for kosher and nonkosher foods?
- c. Are all utensils and equipment clearly identified as kosher or nonkosher?
- d. Are Nonkosher products mixed with kosher products and then sold as kosher?

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## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

Describe soaking and salting process:

5. We exclusively sell or serve kosher food?.

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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RICHARD A. BALL  
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KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
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Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
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## KOSHER REGISTRATION FORM

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Phone: Email:
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Phone: Email:

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3. The certifying individual or organization visits this establishment is continuously on site:  
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Department Representative

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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RICHARD A. BALL  
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Phone: Email:
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Phone: Email:

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
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Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
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## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
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## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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RICHARD A. BALL  
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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
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Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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RICHARD A. BALL  
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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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RICHARD A. BALL  
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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
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City: State: Zip:  
Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

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# Agriculture and Markets

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RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

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# Agriculture and Markets

KATHY HOCHUL  
Governor

RICHARD A. BALL  
Commissioner

## KOSHER REGISTRATION FORM

1. Name of Establishment:  
Address:  
City: State: Zip:  
Phone: Email:
2. Name of Individual or Organization Certifying Food as Kosher:  
Address:  
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Phone: Email:

Please state your background, training, education, experience, and any other information that shows your qualifications to certify kosher product

3. The certifying individual or organization visits this establishment is continuously on site:  
OR  
Is on site time(s) per

4. All meat sold or served by this establishment

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