



STATE OF NEW YORK
DEPARTMENT OF AGRICULTURE & MARKETS
55 Hanson Place, Brooklyn, New York 11217
www.agriculture.ny.gov

Division of Kosher Law Enforcement
Phone: (718) 722-2852

Registration Form for Food Establishments/Caterers Offering Kosher Food

Instructions: Food establishments (e.g., restaurants, cafeterias, those selling food directly to the general public such as a deli, etc.) or caterers selling food or food product represented as kosher and prepared on their premises or under their control are required to register with the Department of Agriculture and Markets (Department) and provide the information below.

Failure to provide all the information herein will delay registration until all required information is provided to the Department.

If one or more individual or organization certifies the food or food products, the required information for each certifier must be provided.

Any change in the registration information requires immediate notification to the Department.

Any false statement made herein, in addition to providing a basis for the revocation of the registration, may be punishable under the provisions of Section 210.45 of the Penal Law of the State of New York.

Any questions concerning this form, the information requested or kosher product registration should be directed to the Department’s Director of Kosher Law Enforcement at the phone number above.

Name of Food Establishment/Caterer: _____ (the “Registering Party”)

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Telephone Number: _____ Fax Number: _____

E-Mail Address: _____

Check as applicable: Food Establishment Caterer

The Registering Party hereby certifies that:

1. _____, with a business address of _____, _____ and a telephone number of _____ is the individual or organization certifying as kosher the food and food products sold or offered by the Registering Party;

2. The certifying individual or organization set forth in Paragraph 1, above, has a current Statement of Qualifications filed with the New York State Department of Agriculture and Markets; and

3. That attached is a true and accurate copy of the Kosher Certification Form, in the form set forth in Agriculture and Markets Law Section 201-c(3), that is or will be posted in a location on the Registering Party’s premises and readily visible to the consumer.

Signature: _____ Date: _____

Kosher Certification Form

1. Name of Establishment: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

2. Name of individual or organization certifying food as Kosher (or state if you are "self-certifying"):

Address and phone number of certifying individual or organization:

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Telephone Number: _____

3. Affiliation and education of certifying individual or organization:

4. The certifying individual or organization visits this establishment _____ times

daily weekly monthly yearly continuously on-site

5. Establishments selling or serving meat must complete the following:

a. All meat sold or served by this establishment: is is not soaked and salted.

b. Describe soaking and salting process: _____

6. We do do not exclusively sell or serve kosher food.

7. Establishments selling and serving both kosher and non-kosher food must complete the following:

a. We do do not use separate ovens and sinks for kosher and non-kosher foods.

b. We do do not use separate utensils, refrigerators, freezers and storage areas for kosher and non-kosher foods.

c. All utensils and equipment are are not clearly identified as kosher or non-kosher.

d. Non-kosher products are are not mixed with kosher products and then sold as kosher.

To be completed by the Department:

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

Department Representative

Date