



**KATHY HOCHUL**  
Governor

**RICHARD A. BALL**  
Commissioner

**KOSHER CERTIFICATION FORM For Certifiers**

**Statement of Qualifications for Persons Certifying Non-Prepackaged Kosher Foods**

Instructions: Individuals or organizations certifying any non-prepackaged food or food products as well as meat, meat preparations, meat by-products or poultry as kosher or kosher for Passover are required to file this statement of qualifications with the Department of Agriculture and Markets. The statement of qualifications is not to exceed 250 words.

Any false statement made herein, in addition providing a basis for the revocation of your registration as a certifier of non-prepackaged kosher foods, may be punishable under the provisions of Section 210.45 of the Penal Law of the State of New York.

Should you have questions about the information requested, please contact the Department's Director of Kosher Law Enforcement at the phone number above.

Certifier's Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tel. Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Certifying Organization's Contact Person: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address: \_\_\_\_\_

For organizations: On a separate sheet of paper, please state the organization's principles and experience and/or background, education, training and/or experience required for its individual certifiers that demonstrate the organization's qualifications to certify kosher product.

For individuals: On a separate sheet, please state your background, training, education, experience and any other information that shows your qualifications to certify kosher product.

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To Be Completed by the Department

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

\_\_\_\_\_  
Department Representative

\_\_\_\_\_  
Date