



KATHY HOCHUL
Governor

RICHARD A. BALL
Commissioner

KOSHER REGISTRATION FORM FOR ESTABLISHMENTS

1. Name of the Kosher Establishment: _____
2. Street Address of the Kosher Establishment:

3. City: _____
4. State: _____
5. Zip: _____
6. Phone Number of Establishment. _____
7. Email of Establishment (Optional) _____
8. Name of Individual or Organization Certifying Food as Kosher

9. Address of Individual or Organization Certifying Food as Kosher (Street Address, City, State, Zip)

10. Phone Number of Certifying Individual or Organization. _____
11. Email of Certifying Individual or Organization (Optional) _____
12. Website for this Certifying Organization (Optional) _____
13. Affiliation & Education of Certifying Individual or Organization. You may wish to include any specific standards that the Certifying individual or Organization follows.

14. Please provide a copy of any certificate that your certifier may have provided via email or mail separately. (Optional) This may be emailed to Kosher@agriculture.ny.gov.

15. The number of times the certifying individual or organization visits the establishment (number of times per day; week, month or year - please indicate) _____

16. Is all meat sold or served by this establishment:

<input type="checkbox"/>	Is soaked and salted
<input type="checkbox"/>	Is not soaked and salted

17. Please describe the soaking and salting process.

18. Do you exclusively sell or serve kosher food?

<input type="checkbox"/>	We do exclusively sell or serve kosher food
<input type="checkbox"/>	We do not exclusively sell or serve kosher food

19. Do you use separate ovens and sinks for Kosher and Non-Kosher Foods?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Not Applicable if you exclusively sell or serve kosher food.

20. Do you use separate utensils, refrigerators, freezers and storage areas for Kosher and Non-Kosher foods?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Not Applicable if you exclusively sell or serve kosher food

21. Are all utensils and equipment clearly identified as Kosher and Non-Kosher?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Not Applicable if you exclusively sell or serve kosher food

22. Are Non-Kosher products mixed with Kosher products and then sold as Kosher?

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Yes

No

Not Applicable if you exclusively sell or serve kosher food

23. I affirm that the information provided above is accurate to the best of my knowledge. False or misleading information may be considered a violation of Section 201-c of Agriculture and Market Law. (If you so affirm, please write your Name and Title)
