



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

Harsono RM Street No.3, C Building, 6th Floor, Room 609, Pasar Minggu – Jakarta 12550
Phone: 6221-7815780-83, Fax: 6221-7815580-83, Email: ditjennak@pertanian.go.id

**APPLICATION FORMS FOR PIG SLAUGHTERHOUSE AND PORK MEAT
PROCESSING PLANT APPROVAL IN COUNTRY WISHING TO EXPORT
PORK MEAT AND MEAT PRODUCTS TO INDONESIA**

Note :

This guideline sets out the information on pig slaughterhouse and/or pork meat establishment required by Directorate Veterinary Public Health, Directorate General of Livestock and Animal Health Services (DGLAHS), Ministry of Agriculture of Republic of Indonesia for evaluation to export pork meat/further processed of pork meat to Indonesia.

Please include any additional information and photographs to support your application.

Inadequate/incomplete submissions may result in delay in processing.

All information submitted must be in English and in hard copy and soft copy.

Exporting Country: _____

A. GENERAL INFORMATION

1. Name of establishment : _____

2. Establishment No. : _____

3. Type of establishments : _____
(Slaughterhouse, pork meat cutting plant, further processing plant, etc.)

4. Address : City/Village: _____

District : _____

Province/State/Prefecture: _____

GPS coordinate: _____

Phone : _____

Facsimile : _____

E-mail : _____

5. Address of headquarters (if different from establishments address):

: City/Village: _____

District : _____

Province/State/Prefecture: _____

GPS coordinate: _____

Phone : _____

Facsimile : _____

E-mail : _____

6. Contact person at establishment :

Name : _____

Position : _____

Telephone : _____

Facsimile : _____

E-mail : _____

7. Date when establishment produced pork meat and/or meat products:
_____ (dd/mm/yy)

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

9. Type of pork meat and/or meat product that are produced in the establishment or company:

10. Type of pork meat and/or meat products are going to be exported:

11. Additional facilities found at establishment:

11.1 Production of pork meat products:

Yes

No

11.2 Separate unit for slaughter/cutting/store:

- Yes No

11.3 Separate quarantine stalls for sick and suspected animal:

- Yes No

11.4 Rendering plant:

- Yes No

11.5 Storage room for pork meat and/or meat products:

- Yes No

12. For pig slaughterhouse, source of the pig:

12.1 Import (country, province/state):

12.2 Domestic:

12.2.1 Owned by the company (region, district)

12.2.2 Integrated farm/contract farm (region, district)

12.2.3 Others

13. For pork meat processing plant, source of pork carcass or meat:

13.1 Import (country, establishment number):

13.2 Domestic:

13.2.1 Owned by the company (establishment number)

13.2.2 Others (establishment number)

14. The produced products intended for:

- Export
 Domestic
 Both

15. The latest 3 years production of pork meat and/or meat products:

_____ : _____ MT/year

_____ : _____ MT/year

_____ : _____ MT/year

16. In case of part or all of the produced products are intended for export

16.1.List the names of importing countries and date of approval, types of exported products, volume and the first year of export and name of importing country: **Annex 1.**

16.2.Date of the last 6 (six) months export and name of importing country: Please attach a copy of veterinary health certificate that accompanied the last shipment to each country): **Annex 2.**

17. Layout Plan of Establishment

Please Attach layout plan showing properly labeled rooms for different operations, including the important equipment/facilities and to indicate the flow of the product and workers by colored arrows: **Annex 3**

B. Additional Information of Establishment

1. Staff information
 - 1.1 Total number of workers in plant:
 - 1.2 Number of workers for:
 - 1.2.1 Slaughter process:
 - 1.2.2 Cutting room/processing room:
 - 1.2.3 Packing:
 - 1.2.4 Storage:
 - 1.3 Does the establishment or company employ the veterinarian? Yes No
If yes, number of employed veterinarian.
 - 1.4 Number of accredited or approved private veterinarians/ auxiliaries stationed in establishment (if any):
 - 1.5 What kind of trainings have been held by the company for staff related to food safety and quality assurance in the last 3 (three) years?
2. Working hours information:
 - 2.1 Number of working hours per day:
 - 2.2 Number of working days per week:
3. Medical Examination and History:
 - 3.1 Is medical examination being a compulsory requirement for recruiting new employees in company?
 Yes No
 - 3.2 Does the company have annual medical checkup policy for the worker?
 Yes No
 - 3.3 Does medical records of each worker available?
 Yes No
 - 3.4 Is the medical examination done by external or internal doctor?
 Yes No

C. Location and Facilities of Establishment

1. Location
 - 1.1 Establishment is located at industrial/agricultural/residential area:
 - Industrial
 - Agricultural
 - Residential area
 - 1.2 Access to roads and a rail serving plant (paved or rendered dustproof).
 - Private road
 - Access to highway road
 - Access to non-highway road
 - Large road
 - 1.3 Please attach satellite picture of surrounding area of the establishment and indicate the building or facilities related to the production of pork meat and/or pork meat products: **Annex 4**

2. Facilities of establishment
 - 2.1 Source of Water
 - 2.1.1 Source of water used in the production of pork meat and/or meat products:
 - 2.1.2 Is the water source examined regularly by the external accredited laboratories?
 - 2.1.3 What kind of laboratory examinations subjected to the water?
 - 2.1.4 Please attach the latest of laboratory examination result
 - 2.2 Source of Electricity
 - 2.2.1 Describe the main source of electricity:
 - 2.2.2 Describe the backup source of electricity:
 - 2.3 Is the quarantine or isolating pen available?

Yes No
 - 2.4 Storage Facilities
 - 2.4.1 For dry ingredients:

Yes No

 If yes, the temperature _____°C and the relative humidity _____%
 - 2.4.2 For chemicals, disinfectants and other cleaning agents:

Yes No

 Please attach list of chemicals, disinfectants and other cleaning agents used. **Annex 5**
 - 2.4.3 Chillers/refrigerators:

Yes No

 If yes, the temperature _____°C and the relative humidity _____%, Capacity: _____ton
 - 2.4.4 Type of freezer:

Air blast freezers: the temperature _____°C
Capacity: _____ton

Individual Quick Freezers: the temperature _____°C
Capacity: _____ton

Others: , the temperature °C
Capacity: _____ton
 - 2.4.5 Cold storage:

Yes No

 If yes, the temperature _____°C and the relative humidity _____%, Capacity: _____ton
 - 2.5 Waste treatment/disposal.
 - 2.5.1 Describe the treatment of liquid waste including disposal (method, frequency, capacity)
 - 2.5.2 Describe the treatment of solid waste including disposal (method, frequency, capacity)
 - 2.5.3 If the disposal of waste using the third party, please attach the latest letter of contract.

- 2.6 Location of mouse/mice trap
Attach copy of layout map of mouse/mice trap: **Annex 6**
- 2.7 Facilities for Workers Attach information related to the quantity/room size/photo of : **Annex 7**
- Staff canteen(s)
 - Toilets
 - Lockers
 - Changing rooms
 - Shower facilities
 - Hands-free operated features for taps and toilet flush
 - Disposable towels and hand disinfectants

D. Procces of Production

1. Give detail flowchart on production/processing of pork and pork products (from acceptance of raw material until finish products, including the application of temperature, time, air pressure, relative humidity and mesh size (if any) **Annex 8**
2. Indicate the control process (CP) and Critical Control Point (CCP) and or Operational Prerequisite Program (OPrP) in the flowchart and give them in detail in table **Annex 9**

E. Food Safety and Quality Assurance

1. The assurance system of food safety and quality applied in the establishment (choose one or more of the following answers):
 - 1.1 Good Manufacturing Practice/ Good Hygiene Practices:
 - Yes No
 - If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 10**
 - 1.2 Hazard Analysis Critical Control Point:
 - Yes No
 - If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 11**
 - 1.3 ISO 22000: 2018 Food Safety Management System
 - Yes No
 - If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 12**
 - 1.4 Food Safety System Certification (FSSC) 22000
 - Yes No
 - If yes, please attach the valid certificate and the latest report of internal and/or external audit including the fulfillment of corrective actions. **Annex 13**
 - 1.5 Others:.....please attach the valid certificate and the latest report of internal audit including the fulfillment of corrective actions. **Annex 14**

2. Is there any food safety team in the establishment?
 Yes No
 If yes, please attach the name of members and education or training background (certified or not certified).
3. Ante Mortem Inspection
 Who conducts the ante mortem inspection:
 Accredited or approved private veterinarian
 Veterinarian employed in establishment
 Others:
4. Describe the criteria of pig which are rejected for slaughter and how will the rejected (suspected, sick, and dead) pig be treated:
Annex 15
5. Postmortem Inspection
 Who conducts the post mortem inspection:
 Accredited or approved private veterinarian
 Veterinarian employed in establishment
 Others:
6. Describe the criteria of carcass and offal which are condemned and how will the condemned carcass and offal be disposed: **Annex 16**
7. State whether laboratory testing is done in the establishment or provided by an external accredited laboratory:
 In-house laboratory
 Please describe the type of examination, and please attach the latest laboratory report for each product. **Annex 17**
 External accredited laboratory
 Please attach the latest laboratory report for each product. **Annex 18**
8. State whether the calibration of measuring tools is done in the establishment or provided by an external accredited institution.
 In-house
 Please describe the type of measuring tools which are calibrated
 Is the person who carries out the calibration certified?
 Yes No
 Please attach the certificate. **Annex 19**
 External accredited institution
 Please describe the type of measuring tools which are calibrated. **Annex 20**
9. Product recall and traceability system:
 Please describe in detail product recall and the traceability system from raw material to finished products. **Annex 21**
10. Pest Control Program
 10.1 Is the pest control program carried out by the management?

Yes No

If yes, please describe the pest control program. **Annex 22**

10.2 If the pest control program carried out by the third party,
Please attach the letter of contract and the latest report of visit.

Annex 23

11. Animal welfare

11.1 Describe the implementation of animal welfare in the establishment since the reception of animals until slaughter

11.2 Describe the person/division who is responsible for the implementation of animal welfare in the establishment

11.3 Is there any approval letter or certification of animal welfare implementation from second party, external institution or third bodies?

Yes No

If yes, please attach the latest certificate. **Annex 24**

12. Cleaning and disinfection

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

12.2 How is cleaning and disinfection performed on equipment (equipment which are contact with pork meat and / or pork meat products)?

12.3 How is cleaning and disinfection on equipment in contact with the condemn

13. Biosecurity

13.1 Is there any disinfection of the animal transport vehicle when entering the establishment?

13.2 Is cleaning and disinfection done on transport vehicle after unloading pigs?

14. Protected Designation of Origin (PDO), Protected Geographical Indication (PGI), Traditional Specialty Guaranteed (TSG)

For the specific pork meat product, is the product certified by one of above certification?

Yes No

If yes, what kind of pork meat products are certified? Please attach the certificate. **Annex 25**

15. Establishment monitoring program

15.1 Is there any regular control or supervision from government inspector or QC for the implementation of food safety program in the establishment?

Yes No

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

F. Declaration by Establishment:

I declare that information given above is true and correct.

Name, Signature* and Company Stamp

Date

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

G. Verification by Veterinary Authority:

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

Name, Signature* and Official Stamp
Of Veterinary Authority

Date

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