**نموذج طلب تحديث قائمة المنشآت المعتمدة لمنتجات الحليب**

**(إضافة، إزالة، تعديل)**

**Form to update the list of approved establishments for Diary Products**

**(Amendments، Delisting، Addition)**

ترغب (الجهة الرقابية) في (اسم الدولة) بإجراء تحديث على قائمة المنشآت المعتمدة لمنتجاتالحليب من خلال التعديلات الواردة أدناه، وعليه تؤكد الجهة الرقابية بأن المنشآت أدناه مسجلة لديها وخاضعة لرقابتها ومطبقة لاشتراطات صحة الغذاء ([هنا](https://www.sfda.gov.sa/sites/default/files/2020-12/FoodHygieneRequirementsAR.pdf)) والمواصفة القياسية رقم (1694) " القواعد العامة لصحة الغذاء"، واللائحة الفنية رقم 21 (الشروط الصحية في مصانع الأغذية والعاملين بها) المعتمدة لدى الهيئة.

The (competent authority) in (name of the country) requests to update the list of approved establishments Diary Products through the amendments listed below, and accordingly, the competent authority confirms that the following establishments fulfill the SFDA Food Hygienic Requirements ([here](https://www.sfda.gov.sa/sites/default/files/2020-12/FoodHygieneRequirementsEn.pdf)), the SFDA.FD 1694 standard “*General Principles Of Food Hygiene*”, and the SFDA.FD 21 technical regulation “*Hygienic Regulations For Food Plants And Their Personnel*”.

* طلب الإضافة (Addition):

|  |
| --- |
| 🗌 Addition |
| No. | Approval Number | Name | City/town | Region | Activity\* | Type\*\* | Remark\*\*\* | note |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| Activity\* | Processing Plant (PP) – F (Fresh)  |
| Type\*\* | Ch (Cheese) - B (Butter) – Cr (Cream) – M (Milk) – L (Labneh) |
| Remark\*\*\* | B (Bovine) - C (caprine) - O (Ovine) - BU (Buffalo) - CA (Camel)  |

السبب Reason:

.........................................................................................................................................................................................................................................

.........................................................................................................................................................................................................................................

* طلب الإزالة (Delisting):

|  |
| --- |
| 🗌 Delisting |
| No. | Approval Number | Name | City/town | Region | Activity\* | Type\*\* | Remark\*\*\* | note |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| Activity\* | Processing Plant (PP) – F (Fresh)  |
| Type\*\* | Ch (Cheese) - B (Butter) – Cr (Cream) – M (Milk) – L (Labneh) |
| Remark\*\*\* | B (Bovine) - C (caprine) - O (Ovine) - BU (Buffalo) - CA (Camel)  |

السبب Reason:

.......................................................................................................................................................................................................................................

.......................................................................................................................................................................................................................................

* طلب التعديل(Amendments) :
1. الوضع الحالي (Current Status)

|  |
| --- |
| 🗌 Current Status |
| No. | Approval Number | Name | City/town | Region | Activity\* | Type\*\* | Remark\*\*\* | note |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| Activity\* | Processing Plant (PP) – F (Fresh)  |
| Type\*\* | Ch (Cheese) - B (Butter) – Cr (Cream) – M (Milk) – L (Labneh) |
| Remark\*\*\* | B (Bovine) - C (caprine) - O (Ovine) - BU (Buffalo) - CA (Camel)  |

1. الوضع الجديد(New Status) :

|  |
| --- |
| 🗌 New Status |
| No. | Approval Number | Name | City/town | Region | Activity\* | Type\*\* | Remark\*\*\* | note |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| Activity\* | Processing Plant (PP) – F (Fresh)  |
| Type\*\* | Ch (Cheese) - B (Butter) – Cr (Cream) – M (Milk) – L (Labneh) |
| Remark\*\*\* | B (Bovine) - C (caprine) - O (Ovine) - BU (Buffalo) - CA (Camel)  |

السبب Reason:

.......................................................................................................................................................................................................................................................

.......................................................................................................................................................................................................................................................

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Competent authority stamp** | **date** | **signature** | **Name of responsible person** | **Competent authority name** |
| **اسم الجهة الرقابية** | **التاريخ** | **التوقيع** | **اسم الشخص المسؤول**  | **ختم الجهة الرقابية** |
|  |  |  |  |  |