



**KOSHER  
SUPERVISION  
OF AMERICA**

• P. O. Box 35721 • Los Angeles, CA 90035 •  
 • Tel 310.282.0444 • Fax 310.282.0505 •  
 • (E-MAIL) certification@ksakosher.com •  
 • www.ksakosher.com •

Application for  
 Kosher Certification  
**Private Label  
 Authorization**

**Private Label Authorization Form**

Date: \_\_\_\_\_

**THIS FORM MUST BE SUBMITTED:**

- **PRIOR TO PRODUCTION FOR A NEW PRIVATE LABEL COMPANY (WHERE PACKAGING BEARS THE  SYMBOL.**

**Manufacturer:**

**Contact/Title:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

*Please specify below where the Private Label Product(s) is to be manufactured:*

**Plant:** \_\_\_\_\_ **City/State:** \_\_\_\_\_

**Plant:** \_\_\_\_\_ **City/State:** \_\_\_\_\_

**Private Label Company:**

**Address:**

**Contact/Title:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

*Please give the Name of the Product and Brand name exactly as it appears on the label. Any number that is part of the product name must be included. Include a copy or sample of the label.*

**Company Product Name**

**Distributor's Product Name**

**Brand to Appear on P.L. Product**

|       |       |       |
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# **Private Label Authorization Form**

Date: \_\_\_\_\_

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**\*PLEASE SUBMIT LABEL PROOFS OF THE PRODUCTS WHICH YOU WOULD LIKE TO GET CERTIFIED**

**\*PLEASE NOTE THAT PRODUCTION FOR A NEW PRIVATE LABEL CANNOT BEGIN UNTIL OFFICIAL APPROVAL HAS BEEN GRANTED TO THE COMPANY BY THE KSA KOSHER.**

X

\_\_\_\_\_  
Sign: Name and Title



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Application for  
Kosher Certification  
**RAW MATERIAL  
SUMMARY**

- Please submit a separate Form 1022 for each product to be certified.
- Please list the exact name of the ingredient. (Including all code numbers, letters & digits that are part of the name).
- Please give the name of the manufacturing source exactly as it appears on the label.
- Please submit 'Letters of Kosher Certification' for each ingredient listed (they may be obtained through your suppliers).
- On a separate sheet, please list all other raw materials in the facility whether intended for kosher use or otherwise.
- Please indicate whether the ingredient is Pareve, Dairy or Meat derived (this information can be obtained from the Letter of Kosher Certification).

|                 |                      |                        |
|-----------------|----------------------|------------------------|
| <b>Product:</b> | <b>Product Code:</b> | <b>Plant Location:</b> |
|-----------------|----------------------|------------------------|

| Ingredients | Kosher Certification<br>Symbol or Agency<br>Name | Name of Supplier<br>Phone No./Contact Person | Name of Manufacturer<br>Phone No./Contact Person | Kosher<br>Designation:<br>Pareve (P)<br>Dairy (D)<br>Meat (M) | METHOD OF<br>PACKAGING:<br>Bags, Tanker<br>Trailer, Ship<br>hold, Totes Drums, |
|-------------|--|--|--|---|--|
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Company Name: \_\_\_\_\_

