QACS-R-08 Rev 02 dated 25/08/2023

QACS International Pvt. Ltd.

**APPLICATION FORM For HRA**

|  |  |
| --- | --- |
| Date of Application |  |
| Company Name |  |
| Address |  |
| Activity | Catering | Bakery/Retail shop |
| Employee No | Permanent | On roll /contract | Helpers | Cleaning/house keeping | Total effectivefood handler |
| Peak | Normal | Peak | Normal | Peak | Normal | Peak | Normal | Peak | Normal |
|  |  |  |  |  |  |  |  |  |  |
| Peak period/ season |  | Normal period/season |  |
| Telephone Number |  | Fax Number |  |
| e-mail |  | Tax number |  |
| Contact person |  | Work timing |  |
| FSSAI License No |  | Validity of License |  |
| Sl. | Apparatus available | Calibrated |
| 1 | Thermometer -25o to 1250 C | Yes | NO |
| 2 | Torch of 800 Lumen | Yes | NO |
| 3 | Magnifying glass | Yes | NO |
| 4 | Stop Watch/ Mobile stop Watch | Yes | NO |
| 5 | Digital Camera / Mobile camera of 10 MPX | Yes | NO |
| *Confirmation* |
| *Contact Name :**Position : Signature:* |

**Application Review**

|  |  |  |
| --- | --- | --- |
| **Activity** | Catering | Bakery/Retail shop |
| **Employee No** |  | **Man days Required** |  |
| **Appratus available** | **Thermometer** | **Yes** | **NO** | **Mangnifing glass** | **Yes** | **NO** | **Torch** | **Yes** | **NO** |
| **Can apparatus be used in emergency** | **No** | **Yes** | **If Yes Then thermometer should be site calibrated in****melting ICE at 0o C** |
| **Approved HRAA** |  |
| **Audit date Scheduled** |  |
|  |  |
| **Date of Review** | **Signature SME/Technical Manager** |