



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 effective food 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 -25° to 125° 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	Mangnifying 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 0° C						
Approved HRAA										
Audit date Scheduled										
Date of Review		Signature SME/Technical Manager								