

Competent Authority Veterinary Services Division Ministry of Agriculture & Fisheries Hope Gardens, Kingston 6 Jamaica

January 2010

Persons Interested in operating a cold storage facility for Meat, Meat Products and Meat By-Product are advised of the Procedures to be followed as listed below:

- Ensure that the cold storage facility meets the requirements of the Meat, Meat Products and Meat By-Products (Inspection and Export) Act 1999 Codex Alimentarius guidelines for cold storage.
- 2. Complete all relevant sections of the application(s) and submit same with the required fees as stipulated in the attached fee schedule.
- 3. Ensure that application(s) are accompanied by all documents required as listed on the form attached as a guide to what must accompany application.
- 4. Request for inspection of cold storage facilities or processing establishment to be made in writing to the Veterinary Services Division (VSD) the Competent Authority, 193 Old Hope Road, Kingston 6, Jamaica.
- 5. Inspector will notify applicant in writing within fourteen (I4) working days of deficiencies, if any and said applicant must indicate by notice to said Inspector or the VSD the Competent Authority as to when the deficiencies will be corrected for further inspection.
- 6. The Veterinary Committee will deliberate on all applications and make their recommendation to the VSD the Competent Authority accordingly. Applicants will be notified in writing of approval or denial of license.
- 7. The appropriate registration Licence and Operating Certificates shall be issued by the VSD the competent Authority upon the settling in full of all fees due and payable on said application.
- 8. A certified copy of Licence(s) under the Meat, Meat Products and Meat By-Products Act shall be required for any application for a Licence to Export Meat, Meat Products and Meat By-Products.



Competent Authority Veterinary Services Division Ministry of Agriculture & Fisheries Hope Gardens, Kingston 6 Jamaica

THE MEAT, MEAT PRODUCTS AND MEAT BY-PRODUCTS ACT 1999 (INSPECTION, LICENSING AND EXPORT)

APPLICATION FOR A LICENCE TO OPERATE A COLD STORAGE FACILITY

Date of Application_____

Application No._____

7.

Name of Cold Storage Facilities				
Address of Cold Storage Facilities				
Name and Address of Operator of Cold Storage Facilities				
Type of cold storage facilities:				
TYPE OF COLD STORAGE		NUMBER OF UNITS		
Refrigerated/Reefer Container (Plug In)				
Refrigerator/Reefer Container (Self Power)				
Cold Roo	oms			
Other:				
Miscellaneous Your application shall be accompanied by the following documents:-				
I.	Name, address and telephone number of facility			
2.	Description/scope of the Cold Storage facilities			
3.	Organizational chart with contact phone number			
4.	Copy of Public Health Certification			
5.	Copy of Registration of Cold Storage by the Registrar of Companies			
6.	Copy of Factory Act certification (if applicable)			
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Table of the food Handlers Permit (name of employees, test and expired date)

8.	Statement indicating that the water supply is from National Water Commission (or other sources)			
9.	Emergency Disaster Plan			
10.	Pest Control Programmes			
II.	Sanitation Programme			
12	Temperature Recording Procedure of cold storage facilities/refrigerated container			
13.	Waste Disposal Programme			
14.	Flow Chart of receival process			
15.	Floor plan of the facilities (in relation with the cold storage, bathrooms, offices road, etc.)			
16.	The Prescribed Fees.			
FOR OFFICIAL USE ONLY				
Date Inspected				
Result of Inspection				
Docume	nt Received Application Granted/Refused			
Fee Rece	rived If Granted Licensed No			
	Operating Certificate No			
Dated A	pplication Received If refused, reasons therefore:			



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THE MEAT, MEAT PRODUCTS AND MEAT BY-PRODUCTS ACT 1999 (INSPECTION, LICENSING AND EXPORT)

APPLICATION FOR A LICENCE TO ENTER PRESCRIBED PRODUCTS FOR EXPORT

		Application No
		Date of Application
I/We		
		signment of prescribed products specified below:
	PART I – Parti	culars of Applicant
Full name of applicant		
Address of applicant		
Position of applicant (where ap	plicable):	
Telephone No	Fax No	E-mail
Full Name of Licensed processi	ng establishment or cold st	torage facilities:
	MISCEL	LANEOUS
Your application is to be accom	panied by the prescribed a	application fees.
	DECLA	ARATION
will be complied with until th	ne products are exported,	apply to the products referred to in this notice have been and and that all due care will be exercised to ensure that the lation in compliance with the provisions of the Act.
I/We understand that any failulicence or export health certifications		ct may result in the suspension or cancellation of the export
Dated this	day of	, 2010
Signature of Applicant		