

# Form for food classification

Staff only
Queue.....
Date.....
Time.....

Opening time: Tuesday and Thursday 8.30 a.m.-16.30 p.m.  
At Consultation Center for Health Products on 5<sup>th</sup> floor Building 6  
Time to take queue card starts from 8.30 a.m.

- Remark:**
1. Each company can consult not more than 2 products
  2. Please prepare a completed form with one copy
  3. If the company prepares a product sample, please submit together with the completed form

1. Company/Agency name .....

2. Product name .....

3. Product characteristics

Liquid (Colour).....  Semi-solid (Colour).....

Powder (Colour).....  Granule/Tablet (Colour).....

Capsule.....

Others (clarify) .....

4. Instruction or preparation method for consumption

Ready-to-eat .....

Cook before eating .....

Mix with other ingredients (premix)

Use as ingredient in product.....

Others (clarify).....

5. Objectives of use or consumption

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6. Type of package

Glass bottle (Type of cap).....  Can (Type of cap).....

Aluminium foil/Retort pouch  Plastic bottle type.....

Plastic bag type .....  Others (clarify).....

7. Storage temperature of product .....Celsius

8. Net weight .....

9. Product formula (as percent)

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