PRODUCT DESCRIPTION AND INTENDED USE

PRODUCT CATEGORY: RAW MOISTURE INFUSED WHOLE MUSCLE	
PRODUCTS	
NAME: CKB MOISTURE INFUSED ROAST	
NAME: ORB MOISTORE INTOSED ROAST	
	NON - PASSOVER:(Premix)
	Premix: [Acidity Regulators (262, 331), Maltodextrin (Maize), Mineral Salt (500), Salt, Antioxidant (316)],
COMPOSITION	PASSOVER:(Premix)
	Premix:[Mineral Salt (500), Acidity Regulator (262), Salt],
STATEMENTS	NO ADDED ARTIFICIAL COLOUR, FLAVOURS, MSG OR GLUTEN. NO HORMONE GROWTH PROMOTANT.
SAFETY & REGULATORY CRITERIA	
	Microbiological limits FSC:
REGULATORY LIMITS	
MEAT & FAT CONTENT	Fat content of meat as per (The food composition database, FSANZ).
QUALITY CRITERIA	a) Koshering staff to ensure that all excess salt is removed from meat trim
	after the koshering process. This is a visual assessment.
	b) Packaging staff to ensure that all casings are intact, without breakages
CASING SIZE	Casing size:
METHOD OF	Chilling or Freezing, MAP, Sodium metabisulphite (E223)
PRESERVATION	
PACKAGING - PRIMARY	Fixed weight, OR Variable weight (frozen) units/tray.
TARE	
PACKAGING - SECONDARY	Carton / Black Printed H/D carton
STORAGE CONDITIONS	Held in a chiller at 0°C – 4 °C, or freezer at –15 °C or colder (hard frozen).
DISTRIBUTION METHOD	In insulated and refrigerated MTVs. Delivered at not more than 5 °C (chilled) and at –15°C or less (hard frozen) in clean, new containers. The transportation of meat and meat
	products should not jeopardise the safety and suitability of the meat
SHELF LIFE	Use within days if kept in MAP and stored between 0°C and 4°C (chilled). Once opened, use the product within days if stored between 0°C and 4°C (chilled) Use within 6 months if kept at -15 °C or lower(hard frozen).
	To o or lower (mare mozern).
	USE BY DATE OR BEST BEFORE APPLIED
INTENDED CONSUMER/ SPECIAL LABELLING INTENDED USE/	Intended for general consumption. See attached label. Intended to be thoroughly cooked before consumption.

CONTINENTAL KOSHER BUTCHERS P/L LICENCE NO. 663

QUALITY ASSURANCE PROGRAM

Continental Kosher Butchers Pty Ltd authorization

Signature: Printed Name: LARISA ULIANITSKY

Title: **QAM** Date: