

FOOD APPROVAL AMENDMENT

Food Act 2006

PART 1 - APPLICANT DETAILS

LICENSEE / APPLICANT DETAILS Please note, a licensee name <u>must</u> be a legal entity ie. Individual's name/s, a corporation name (Pty Ltd) or a incorporation name (Inc).		
Applicant Name <i>(full name, Pty Ltd or Inc)</i>		
Residential Address		
Postal Address		
Telephone	(business)	(mobile)
Email		
Preferred method of correspondence	<input type="checkbox"/> Post <input type="checkbox"/> Email	
CORPORATION OR INCORPORATED ASSOCIATION DETAILS Provide additional details if you are applying as a corporation or a incorporated association.		
Corporation or Incorporated Association Name		
Director/s or Management Committee Name/s		
Nominated Address	<i>(under Corporations Act or Associations Incorporation Act 1981)</i>	
Telephone	(business)	(mobile)
Email		
APPLICANT SUITABILITY TO HOLD AN APPROVAL		
Do you (the applicant*) have a conviction for a relevant offence, other than a spent conviction under the Food Act 2006, Food Act 1981 or corresponding law in other states or territories?		
<input type="checkbox"/> Yes (attach details of offence and circumstances) <input type="checkbox"/> No		
Have you (the applicant*) held a licence under the Food Act 2006, Food Act 1981 or a corresponding law in other states or territories that was refused, suspended or cancelled?		
<input type="checkbox"/> Yes (attach details) <input type="checkbox"/> No		
Have you (the applicant*) completed any formal food safety training or qualification/s?		
<input type="checkbox"/> Yes (attach a copy of certification) <input type="checkbox"/> No		
<i>*(the applicant or, if the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee).</i>		

PART 3 - BUSINESS DETAILS

BUSINESS DETAILS Please note a trading name is not a legal entity.		
Trading Name		
ABN / ACN Number		
Not For Profit Organisation	<input type="checkbox"/> No <input type="checkbox"/> Yes (provide a completed not for profit application form)	
Postal address		
Details of all food to be manufactured or sold		
Business Type - Brief description of the food business proposed to be carried on under the licence (ie takeaway, café, catering etc)		
Proposed Term of Licence	Commencement Date	Completion Date or Ongoing
FIXED & TEMPORARY STALLS BUSINESS DETAILS (if applicable)		
Premises Address or Proposed Location		
Legal Description	Lot	Plan
Water Source	<input type="checkbox"/> Town/Reticulated <input type="checkbox"/> Tank <input type="checkbox"/> Bore	
Water Treatment Details		
MOBILE BUSINESS DETAILS (if applicable) To hold a Mobile Licence with Scenic Rim Regional Council (SRRC), a business must operate within our region. A Mobile Food Business Licence is only an approval under the <i>Food Act 2006</i> for the preparation and selling of food. It is not an approval for the trading at any particular place or location. Contact Council for further information.		
Vehicle Description		
Vehicle Make		
Vehicle Model		
Vehicle Registration No.		
Food Vending Machine Serial or Unique Identifying Number	if applicable	
Address vehicle is housed		
Address of Inspection Location*		
<i>*Unless otherwise organised by an officer, all inspections (including annual inspections) will be undertaken at a Council Facility.</i>		

PART 3 Cont - BUSINESS DETAILS

MOBILE WATER BUSINESS DETAILS (additional to above if applicable)	
Tank Capacity (Litres)	
Tank Construction Material	<input type="checkbox"/> Stainless Steel <input type="checkbox"/> Mild Steel <input type="checkbox"/> Other <input type="checkbox"/> Polyethylene <input type="checkbox"/> Fibreglass
Pump capable only drawing from tanker	<input type="checkbox"/> Yes <input type="checkbox"/> No
Compliant Backflow Device Installed	<input type="checkbox"/> Yes <input type="checkbox"/> No

PART 4 - FOOD SAFETY SUPERVISOR (FSS) NOMINATION

A food business licensee must advise Council of the name and contact details of each Food Safety Supervisor for the business.






Council requires the nomination of a Food Safety Supervisor before issuing the licence. Operation without a licence is an offense under the *Food Act 2006*.

FOOD SAFETY SUPERVISOR (FSS)		
FSS Name		
Postal Address <i>(If not the business address)</i>		
Telephone	(business)	(mobile)
Email		
FSS Signature		Date
Please submit a copy of a statement of attainment or certificate issued by a Registered Training Organisation that demonstrates the Food Safety Supervisor has the required competencies. Council will NOT accept a nomination for the food safety supervisor without a copy of their qualification.		

Information relating to the role of a Food Safety Supervisor, proof of competencies and required training is available on the Toolbox Website http://www.health.qld.gov.au/ph/documents/ehu/fs_guideline.pdf

Keep up to date with Food Recalls!! Food Safety Australia New Zealand (FSANZ) offers a free subscription service for food recall alerts through its www.foodstandards.gov.au website. Sign up now to receive information about food recalls which may affect your business

PART 5 - SUBMISSION DETAILS

Payment Required?	Yes <input type="checkbox"/> (complete Credit Card Authorisation form if not paying in person)	No <input type="checkbox"/> (attach proof of not for profit or other evidence)
Supporting Documentation	Have you obtained and included all necessary supporting documentation to be submitted with this application?	
Privacy Statement <p>Scenic Rim Regional Council is collecting your personal information in accordance with the <i>Food Act 2006</i> in order to assess and issue the application for approval. The information will only be accessed by Scenic Rim Regional Council for Council business related activities. Some of this information may be given to State or Commonwealth Government agencies if requested for the purposes or investigating any alleged offences under State or Commonwealth Legislation. Your personal information will not be given to any other person or agency unless you have given us permission or we are required to do so by law. Your personal information is also handled in accordance with the <i>Privacy Act 2009</i>.</p>		
Declaration <p>I hereby am duly authorised to apply for an approval to undertake the above mentioned prescribed activity. I certify that I have provided all third party consent and documentation which is true, correct and subject to compliance in accordance with the <i>Food Act 2006</i> and Policies of the Scenic Rim Regional Council.</p>		
Applicant Name (please print)		
Signature		Date
Council use only - PLUS Creation		
Amount \$	Receipt #	Date
Cashier		Application #
Submitting to Council - ABN 45 596 234 931		
	Scenic Rim Regional Council, PO Box 25, BEAUDESERT QLD 4285	
	Beaudesert Customer Service Centre 82 Brisbane Street, Beaudesert Boonah Customer Service Centre 70 High Street, Boonah Tamborine Mountain Library & Customer Service Cnr Main St & Yuulong Rd, Tamborine Mountain	
	(07) 5540 5111	 (07) 5540 5103
		 mail@scenicrim.qld.gov.au