

# FOOD APPROVAL APPLICATION TEMPORARY ONCE OFF

*Food Act 2006*

## PART 1 - APPLICANT DETAILS

<b>LICENSEE / APPLICANT DETAILS</b> 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).		
<b>Applicant Name</b> <i>(full name, Pty Ltd or Inc)</i>		
<b>Residential Address</b>		
<b>Postal Address</b>		
<b>Telephone</b>	(business)	(mobile)
<b>Email</b>		
<b>Preferred method of correspondence</b>	<input type="checkbox"/> Post <input type="checkbox"/> Email	
<b>CORPORATION OR INCORPORATED ASSOCIATION DETAILS</b> Provide additional details if you are applying as a corporation or a incorporated association.		
<b>Corporation or Incorporated Association Name</b>		
<b>Director/s or Management Committee Name/s</b>		
<b>Nominated Address</b>	<i>(under Corporations Act or Associations Incorporation Act 1981)</i>	
<b>Telephone</b>	(business)	(mobile)
<b>Email</b>		
<b>APPLICANT SUITABILITY TO HOLD AN APPROVAL</b>		
<b>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?</b>		
<input type="checkbox"/> Yes (attach details of offence and circumstances) <input type="checkbox"/> No		
<b>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?</b>		
<input type="checkbox"/> Yes (attach details) <input type="checkbox"/> No		
<b>Have you (the applicant*) completed any formal food safety training or qualification/s?</b>		
<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 2 - BUSINESS DETAILS

TEMPORARY ONCE OFF FOOD BUSINESS DETAILS	
<b>Trading Name</b>	
<b>Event</b> (if applicable)	
<b>Date of Event</b>	
<b>Temporary Trading Location</b> (include property address)	

## PART 3 - FOOD SAFETY SUPERVISOR (FSS) NOMINATION

Please use the following table to provide the details of a Food Safety Supervisor (FSS)

FOOD SAFETY SUPERVISOR (FSS)		
<b>FSS Name</b>		
<b>Postal Address</b> (If not the business address)		
<b>Telephone</b>	(business)	(mobile)
<b>Email</b>		
<b>FSS Signature</b>		<b>Date</b>

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.

**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](http://www.foodstandards.gov.au) website. Sign up now to receive information about food recalls which may affect your business

## PART 4 - PLAN

The plan must be as accurate and to scale as possible and provided in a neat and fashion.





**Please provide a plan of your Temporary Food Premises including aspects detailed below. An example plan has also been provided refer Appendix 1.**

- Walls, floor and ceiling.
- Hand washing facilities
- Utensil and food prep washing facilities
- Cooking and preparation equipment
- Food storage equipment

*Note: You can provide a separate attachment to the application if you prefer.*

## PART 5 - SUBMISSION DETAILS

**NOTE: Payment must be made with the submission of the application**

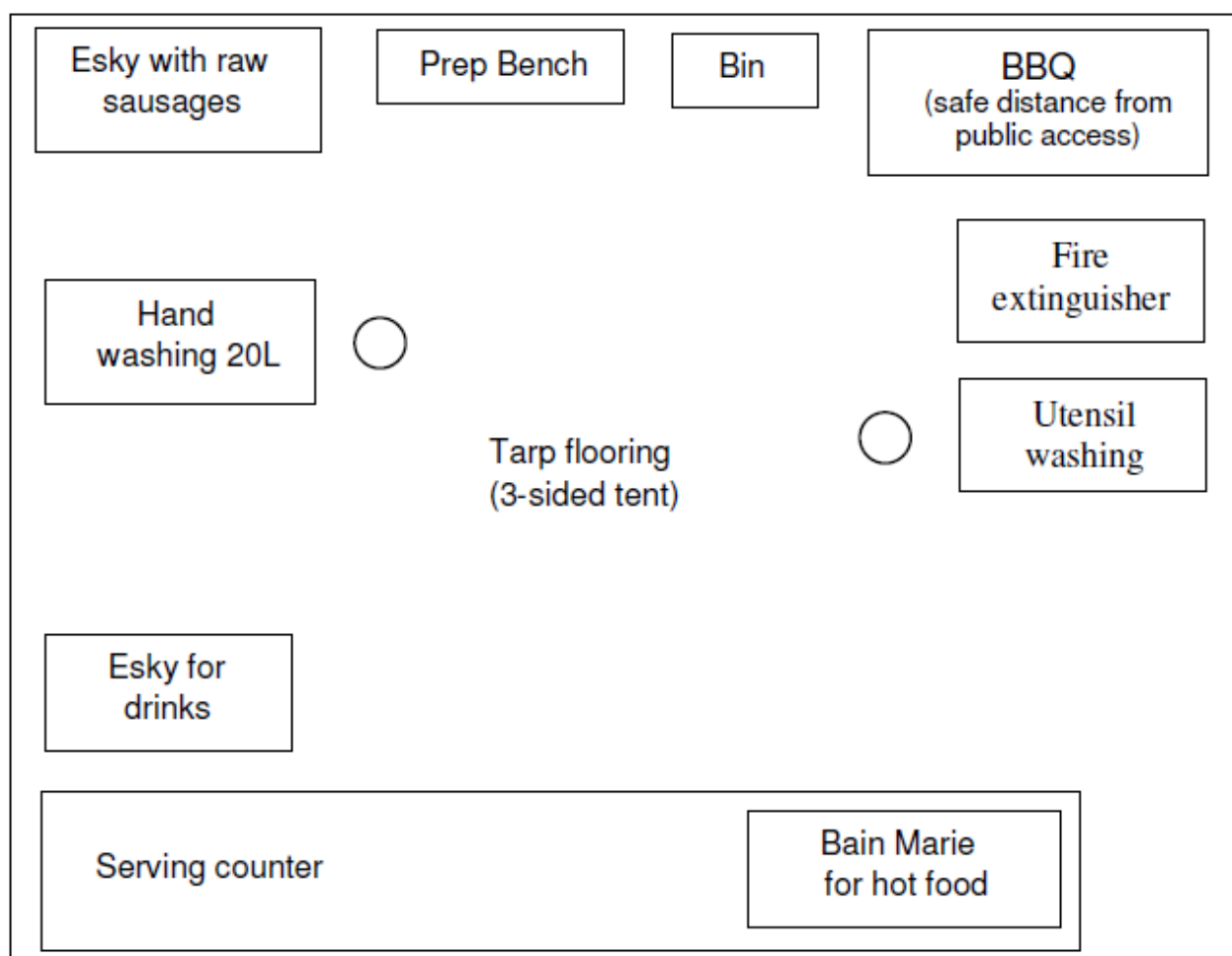
<b>Payment Required?</b>	Yes <input type="checkbox"/> (complete Credit Card Authorisation form if not paying in person)	No <input type="checkbox"/> (attach proof of not for profit or other evidence)
<b>Supporting Documentation</b>	Have you obtained and included all necessary supporting documentation to be submitted with this application?	
<b>Privacy Statement</b> <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>		
<b>Declaration</b> <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>		
<b>Applicant Name</b> (please print)		
<b>Signature</b>		<b>Date</b>
<b>Council use only - PLUS Creation</b>		
<b>Amount \$</b>	<b>Receipt #</b>	<b>Date</b>
<b>Cashier</b>	<b>Application #</b>	
<b>Submitting to Council - ABN 45 596 234 931</b>		
<input type="checkbox"/>	Scenic Rim Regional Council, PO Box 25, BEAUDESERT QLD 4285	
	Beaudesert Customer Service Centre Boonah Customer Service Centre Tamborine Mountain Library & Customer Service	82 Brisbane Street, Beaudesert 70 High Street, Boonah Cnr Main St & Yuulong Rd, Tamborine Mountain
	(07) 5540 5111	 (07) 5540 5103
		 <a href="mailto:mail@scenicrim.qld.gov.au">mail@scenicrim.qld.gov.au</a>

## Appendix 1 - EXAMPLE FLOOR PLAN

When submitting a Temporary Food Approval application, you must provide a floor plan (refer example below).

Should you have any questions regarding food safety and hygiene, please contact Council's Environmental Health team on 07 5540 5111.

Other tools and fact sheets like these can be found at [www.lgtoolbox.qld.gov.au](http://www.lgtoolbox.qld.gov.au)



## Appendix 2 - CHECKLIST

Please use the following checklist as a guide when preparing to operate your Temporary Food Premises.

Should you have any questions regarding food safety and hygiene, please contact Council's Environmental Health team on 07 5540 5111.

Other tools and fact sheets like these can be found at [www.lgtoolbox.qld.gov.au](http://www.lgtoolbox.qld.gov.au)

Equipment list	Equipment required Yes(✓)/No(X)	Comments/Actions
Tent (3 walls & roof and tent pegs if necessary)		
Floor covering		
Hot & cold display unit		
Appropriate sneeze barriers (unpackaged food)		
Table/s for preparation		
Table/s for		
■ hand washing &		
■ utensil washing		
Esky or mobile cool room		
Waste bin with lid		
Waste bin liner/s		
Potable water (hand washing)		
20 litre water container (hand washing)		
Waste water bucket (hand washing)		
Potable water (utensil washing)		
20 litre water container (utensil washing)		
Waste water bucket (utensil washing)		
Heavy duty cleanser & sponge/cloth		
Sanitiser		
Liquid soap		
Paper towels		
Utensils (tongs, spoons, spatula etc.)		
Disposal gloves		
Cutlery		
Cutlery container		
Serviettes		
Straw dispenser		
Disposable equipment (straws, cups and plates etc.)		
Sauce squeeze bottle		
Individually sealed packs of condiments		
Tablecloths		