



Kentish Council

69 High Street (PO Box 63) SHEFFIELD TAS 7306
PH 6491 0200 FAX 6491 1659

Food Business

*Food Act 2003
Sections 87 & 89*

Application for Registration/Renewal of a Food Business

☺ If this application is a renewal and no details have changed since last year's renewal please tick this box and fill in name of applicant and business name

Please remember to sign and date over page

Food Business Proprietor's Details

Name of applicant

ACN (if a Company)

Address

..... Postcode

Telephone Mobile Phone

Facsimile Email

Details of skills and knowledge (food safety qualifications, training or experience) of the proprietor and food handlers (please attach details if insufficient space).

.....

.....

Business Details

Location of business

Name of business

Contact person

Telephone Mobile Phone

Facsimile Email

Emergency contact..... Telephone

Type of business (eg. Cafe, Bakehouse, Restaurant etc)

Types of food

.....

Please continue over the page

Proposed hours of operation (or attendance on site):

Mon Tue Wed Thu
Fri Sat Sun

Details of any proposed or operational quality assurance program, food safety plan or other approved food safety management system (Please attach details if insufficient space).

Details of any raw egg product manufactured on the premises (eg; aioli, mayonnaise, eggnog, ice cream recipe with uncooked meringue mixture folded in, etc).

Plans and Specifications - new or altered food businesses only

For new or altered premises please attach plans and specifications or other information clearly showing the design, fitting out and arrangement of plant equipment for the proposed use.

Fee and Signature

Signature of applicant for registration/renewal Date/...../.....

Direct deposits please tick if taking this option – BANK CBA - BSB 067-016 Account Number 10006858 Use your invoice number starting with “PSI_____” as the reference. Application will be processed upon receipt of payment.

Privacy Statement: Completion of this form may require the disclosure of personal information. The intended recipients of this information are officers of Kentish Council and the Department of Health and Human Services in order to advance the purposes of this form and carry out business required by the *Food Act 2003*. The *Personal Information Protection Act 2004* and Council’s Privacy policy regulate the use of this information, which will not be disclosed to any other party, except with your permission or if required or authorised by law. You may make application to access or amend personal information held by Council on 03 6491 0200.

Please lodge your completed form and application fee with the Environmental Health Officer of the Council

Office Use Only – REEH INST 68035

Receipt No.:

Date:/...../.....

- \$20.00** – Temporary Premises (*1 day event - Kentish*)
- \$50.00** – Temporary Premises (*3 or more days – Kentish*)
- * State Wide Temporary Premises have the same risk assessment fee structure as below**
- \$70.00** – Seasonal Premises or School Canteen
- \$100.00** – Low Risk Premises *
- \$150.00** – Medium Risk Premises *
- \$200.00** – High Risk Premises *