Shire of Carnarvon

APPLICATION FOR REGISTRATION OF FOOD BUSINESS

(Food Act 2008)



Proprietor/Business details

Proprietor Name:			
Postal Address:			
ABN:			
Phone:	A/H:		Fax:
Email:			
Primary language spoken:		Number of equivalent	t full time staff:

PLEASE NOTE: The food business is required to notify the Shire of Carnarvon of any changes to the information provided below. The new information must be provided to the Shire of Carnarvon before the changes occur. Any changes to the information may affect the classification of a food business.

Is this food business a:		
	Proposed Food Business	
	Existing Food Business	
	 Alteration to Food Business 	

Premises details (*if food vehicle/temporary food business please provide details of where the vehicle is garaged*)

Details of any associated premises:

A *scaled* floor plan and specifications of the food business <u>must be submitted with this form</u>. The plans must include the following:

- a) the use of every room;
- b) the structural finishes of every wall, floor and ceiling;
- c) the position and type of every fitting and fixture;
- d) all sanitary conveniences, change rooms, storeroom, ventilating systems, drains, grease traps and provision for waste disposal; and
- e) plans and specifications of the mechanical exhaust system if cooking is to take place in the food premises.

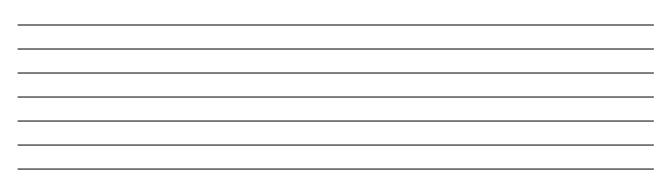
Description of use of premises

Please tick **all** boxes that apply (there may be more than one)

Manufacturer/processor Hotel/motel/guesthouse Retailer Pub/tavern **Food Service** Canteen/kitchen Distributor/importer Hospital/nursing home Packer Childcare centre Storage Home delivery Transport Temporary food premises Restaurant/café Mobile food operator Snack bar/takeaway Market stall Caterer Charitable or community organisation Meals-on-wheels Other ____

Please provide more details about your type of business

(For example: butcher, bakery, seafood processor, soft drink manufacturer, milk vendor, service station. If business is a catering business, please provide maximum patrons estimate)



Do you provide, produce or manufacture any of the following foods?

Please tick **all** boxes that apply

- □ Prepared, ready to eat¹ table meals
- Frozen meals
- Raw meat, poultry or seafood (i.e. oysters)
- Processed meat, poultry or seafood
- Fermented meat products
- □ Meat pies, sausage rolls or hot dogs
- Sandwiches or rolls
- □ Soft drinks/juices
- Raw fruit and vegetables
- Processed fruit and vegetables

- Confectionary
- Infant or baby foods
- Bread, pastries or cakes
- Egg or egg products
- Dairy products
- Prepared salads
- Other:

Nature of food business	

	Yes	No
Are you a small business ² ?		
Is the food that you provide, produce or manufacture ready-to-eat		
when sold to the customer?		
Do you process the food that you produce or provide before sale		
or distribution?		
Do you directly supply or manufacturer food for organisations that		
cater to vulnerable persons ³ ?		

¹ 'Ready to eat' means food that is ordinarily consumed in the same state as in which it is sold

² Is a business that employs less than 50 people in the 'manufacturing sector' or less than 10 people in the 'food services' sector

³ Standard 3.3.1 *Australia New Zealand Food Standards Code*

H004 – Application for Registration of Food Business (Shire of Carnarvon)

To be answered by manufacturing/processing businesses	Yes	No	
only:			
Do you manufacture or produce products that are not shelf			
stable?			
Do you manufacture or produce fermented meat products such			
as salami?			
To be answered by food service and retail businesses only (including charitable and			
community organisations, market stalls and temporary food premises):			
Do you sell ready-to-eat food at a different location from where it			
is prepared?			

Hours of operation:

Monday	Friday	
Tuesday	Saturday	
Wednesday	Sunday	
Thursday		

Recall contact:

First name		
Last name		
Phone	A/H:	Fax:
Email		

Declaration:

I, the person making this application declare that:

- the information contained in this application is true and correct in every particular
- the prescribed fee is enclosed with this application.

Signature of applicant: ____

In the case of a company, the signing officer must state position in the company

Date:

Please make cheques payable to SHIRE OF CARNARVON MUNICIPAL ACCOUNT

OFFICE USE ONLY: Fees Payable to a/c 1743 Date: Receipt# Cashier