

## Food Business Details

Business Name:	
Trading as:	
Food Business Address:	
Postal Address:	
Business Ph:	Mobile:
Business Email:	
ABN:	

## Food Business Proprietors Details

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Other
Name(s) of Proprietor: <i>Name(s) will appear on Certificate of Registration if applicable.</i>	Proprietor 1		Proprietor 2	
Address(es) of Proprietors:				
Proprietor Email Address:				
Proprietor Ph:				
Preferred Contact Person:				

**Please tick all that apply –**

Locations for preparing or storing food (more than 1 may apply) -

- ☐ Commercial Premises      Address: \_\_\_\_\_
- ☐ Residential Premises      Address: \_\_\_\_\_
- ☐ Food van: Garage address \_\_\_\_\_      Number plate: \_\_\_\_\_
- ☐ Food transport vehicles      Number \_\_\_\_\_ Garage address \_\_\_\_\_
- ☐ Temporary Food Stall

Labelling - ☐ Producing own labels (we may ask for copies of labels) ☐ Selling already packaged food

Transporting food - ☐ In food transport vehicle ☐ In vehicle used for passengers

Activities – ☐ Catering for groups ☐ Child Care Centre, Aged Care, Delivered Meals food business

**Please provide a summary of all food products to be sold and approximate quantities (or attach menu /product list) e.g. packaged foods, jams, cakes, chutney, sandwiches, soup, bread, meat, ready to eat meals, coffee, smoothies, salads, seafood, chicken, ice-cream, beverage production**

	Quantity

**Please tick if making or selling any of the following foods –**

- ☐ Aioli, Hollandaise, Tiramisu, ☐ Fermented foods (kombucha) ☐ Dried cured meats (biltong, dried sausage)  
☐ Oysters ☐ Pate' ☐ Bean sprouts ☐ Sushi

**Please provide copy of Food Safety Supervisor Certificate –** (if applicable under Australian New Zealand Food Standard 3.2.2A Food safety management tools).

**Please provide copy of food handler training qualifications or outline of food safety experience -** (City of Busselton provides free online food safety training course FoodSafe).

How many food handlers will be working in the business?

**CHECKLIST OF REQUIRED INFORMATION TO BE INCLUDED WITH THIS APPLICATION:**

- ☐ Floor plan showing applicable infrastructure
- ☐ List of equipment (fridge/freezer, oven hot plate, deep fryer etc.)
- ☐ List of facilities (hand washing facilities, sink, food storage and ventilation etc.)
- ☐ Company extract (if applicable)

**Declaration:** I, the person making this application declare that the property owner has given permission for the food activities to occur and the information contained in this application is true and correct in every particular;

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

In the case of a company, please state your position \_\_\_\_\_

**SCHEDULE OF FEES** - The following fees are payable after application an invoice will be issued

- Application for Notification: \$85
- Application for Registration: High/Medium Risk \$271, Low Risk \$146  
 and
- Service Fee (pro rata applies): High Risk \$498, Medium Risk \$248, Low Risk \$114