APPLICATION TO REGISTER A FOOD PREMISES

Collection Notice

We will handle any personal information you have provided in this form in accordance with the *Privacy and Data Protection Act 2014*. Our privacy policy contains information about how you may access your personal information and seek correction of such information; as well as how to complain about a breach of the Australian Privacy Principles and how we will deal with such a complaint. For more information, please see our Privacy Policy or contact our team on (03) 5391 4444. Your personal information will not be disclosed to any other party unless Council is required to do so by law, has gained your consent to do so or an information privacy principle exemption applies.

IMPORTANT: Once your form has been processed, you will receive an invoice for payment. Payment must be made within 30 days, or your application may not be processed.

Areas marked with a red asterisk (*) are mandatory and must be completed. **Council Use Only: Application Number: Application Date:** Ledger Number: Date of Registration: **IMPORTANT** Please read the pre-application information section at the beginning of this form. If your premises is listed as a class 4, please complete a notification form instead of this registration. **Proprietor Details*:** Title: Surname: Given Name: If the proprietor is a company or association, specify name of person completing the application and authority (e.g. Director of Company): Address: **Business Phone:** Mobile: Email: Premises Details*: Number of Staff: Trading name of Premises: Address:

Contact person at premises (if not proprietor):

Phone:			Email:			
		Liliali.				
Proposed opening date:						
Food vehicle details (if applicable	le):					
Registration Number:		Make: Mode			Model:	
At what address is the vehicle garaged when not in use:						
Community Group:						
A community group is a not-for-profit organisation or a person(s) undertaking a food handling activity solely for the purpose of raising funds for charitable purposes or for a not-for-profit organisation.						
Are you a community group that sells food up to two consecutive days at a time and most food handlers are volunteers?						
Yes	No	No (if NO, go to section: Food Related Details)				Details)
If yes, are you selling ready to eat high risk food?						
Yes	No	No (if NO, you are classified as Class 3 go to section: Classification.				
If yes, is all of the high-risk food co	ooked on	site with	the intent	tion of s	erving imn	nediately?
Yes	No	0				
If yes, you are classified as Class 3. Go to section: Classification						
If no, you are classified as Class 2. You are exempt from the food safety supervisor requirements. Go to						
section: Classification						
Business Type*						
What is the intended business type? (please select from the following)						
Commercial Business				Home Business		
Do you have a mobile or temporary premises associated with this fixed premises registration?						
Yes			No			
Position of Observices (and only of			4' I	I = \ -		
Business Classification (select your food classification below): Class 1: Food that is served or prepared exclusively for patients or people in an:						
				for pat	Childcare	•
Aged Care Service	andling	Hospit		roquir		
Class 2: Premises selling/handling unpackaged food requiring temperature control. Cafes, delicatessen, takeaway premises, restaurants.						
Homebased businesses manufacturing high risk products requiring refrigeration (cakes containing						



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Community group – Food is cooked, refrigerated and then re-heated or food served does not involve a kill step – non-profit, all food handlers are volunteers.

Other food business handling unpackaged high-risk food:

Class 3: Food premises selling or handling unpackaged food that does not require temperature control and/or pre-packaged food requiring temperature control.

Community Group: Cooked on site and served immediately – Non-profit.

Home business selling low risk products that require no refrigeration.

Pre-packaged food that requires temperature control or u-packaged food that does not require temperature control.

Class 3A: Food premises handling potentially hazardous food in specific nature.

Hazardous food served to guest for immediate consumption at accommodation.

Food made using a hot-fill process e.g., chutney, relish, salsa or tomato sauce

Food Safety Supervisor (Class 1 and 2 food premises only)

Name of Food Safety Supervisor:

You MUST attach a certificate of competency

Accepted Course Codes:

Hospitality – Businesses such as restaurants, cafes and hotels

- SITXFSA005: Use hygienic practices for food safety.
- SITXFSA006: Participate in safe food handling practices.

Health – Businesses such as hospitals, childcare centres aged care centres

- HLTFSE001: Follow basic food safety practices.
- HLTFSE005: Apply and monitor food safety requirements.
- HLTFSE007: Oversee the day-to-day implementation of food safety in the workplace.

IMPORTANT: A food safety supervisor is not required if the food premises: has a declared QA food safety program that includes competency based or accredited training for staff of the premises; or is a community group the operates for two consecutive days or less.

Fees: For initial fees, please contact Council on 5391 4444

Fee: Date Paid: Receipt No:

How to pay:

The fee for registration of a food business depends upon your classification and number of food handling staff. Please contact Hindmarsh Shire Council – Environmental Health Officer to determine your current applicable fees for class 1, class 2, class 3 and class 3A premises.

Payments may be made by cash or cheque.

IMPORTANT: Once your premises is operating, you will be required to renew your registration on a yearly basis.



Declaration:

By signing this form, I declare that the information I have provided is true and correct. This application is a legal document and penalties exist for providing false or misleading information.

- If the business is owned by a sole trader or partnership, the proprietor(s) must sign and print names.
- If the business is owner by a company or association the applicant on behalf of that body must sign and print their name.

Signature*:	Signature*:
Print Name*:	Print Name*:
Date*:	Date*: