

Appendix 2

Food Premises Notification Form

Contact Details	
Name of proprietor	
Business address of proprietor	
Trading name of food business	
<p>Contact details</p> <p><i>PLEASE NOTE: If this is a single food business then complete details in this section. If there are multiple premises (within the jurisdiction of the relevant enforcement agency) then complete details under the section 'Location of all food premises' below.</i></p>	<p><input type="checkbox"/> Business hours phone number: _____</p> <p><input type="checkbox"/> After hours phone number: _____</p> <p><input type="checkbox"/> Facsimile number: _____</p> <p><input type="checkbox"/> Email address: _____</p>

Nature of Business Information

NOTE:

The food business is required to notify the enforcement agency of any changes to the information provided below. The new information must be provided to the enforcement agency before the changes occur. Any changes to the information may affect the classification of a food business.

1(a) What is your business type?

- ✓ Please tick all boxes that apply:
- | | |
|---|---|
| <input type="checkbox"/> Manufacturer/processor | <input type="checkbox"/> Hotel/motel/guesthouse |
| <input type="checkbox"/> Retailer | <input type="checkbox"/> Pub/tavern |
| <input type="checkbox"/> Food service | <input type="checkbox"/> Canteen/kitchen |
| <input type="checkbox"/> Distributor/importer | <input type="checkbox"/> Hospital/nursing home |
| <input type="checkbox"/> Packer | <input type="checkbox"/> Childcare centre |
| <input type="checkbox"/> Storage | <input type="checkbox"/> Home delivery |
| <input type="checkbox"/> Transport | <input type="checkbox"/> Mobile food operator |
| <input type="checkbox"/> Restaurant/café | <input type="checkbox"/> Market stall |
| <input type="checkbox"/> Snack bar/takeaway | <input type="checkbox"/> Charitable or community organisation |
| <input type="checkbox"/> Caterer | <input type="checkbox"/> Temporary food premises |
| <input type="checkbox"/> Meals-on-wheels | <input type="checkbox"/> Other _____ |

(b) Please provide more detail about your business type.

(For example: butcher, bakery, seafood processor, soft drink manufacturer, milk vendor, service station.)

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

- ✓ Please tick all boxes that apply:
- | | |
|---|---|
| <input type="checkbox"/> Prepared, ready-to-eat* table meals | <input type="checkbox"/> Confectionery |
| <input type="checkbox"/> Frozen meals | <input type="checkbox"/> Infant or baby foods |
| <input type="checkbox"/> Raw meat, poultry or seafood | <input type="checkbox"/> Bread, pastries or cakes |
| <input type="checkbox"/> Processed meat, poultry or seafood | <input type="checkbox"/> Egg or egg products |
| <input type="checkbox"/> Fermented meat products | <input type="checkbox"/> Dairy products |
| <input type="checkbox"/> Meat pies, sausage rolls or hot dogs | <input type="checkbox"/> Prepared salads |
| <input type="checkbox"/> Sandwiches or rolls | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Soft drinks/juices | |
| <input type="checkbox"/> Raw fruit and vegetables | |
| <input type="checkbox"/> Processed fruit and vegetables | |

3. What is the nature of your food business?		
To be answered by all businesses:		
(a) Are you a small business*?	yes	no
(b) Is the food that you provide, produce or manufacture ready-to-eat* when sold to the customer?	yes	no
(c) Do you process* the food that you produce or provide before sale or distribution?	yes	no
(d) Do you directly supply or manufacture food for organisations that cater to the sick, elderly, children under 5 years of age or pregnant women (such as hospitals, nursing homes or child care centres)?	yes	no
To be answered by manufacturing/processing businesses only:		
(e) Do you manufacture or produce products that are not shelf stable*?	yes	no
(f) Do you manufacture or produce fermented meat products such as salami?	yes	no
To be answered by food service and retail businesses only (includes charitable and community organisations, market stalls and temporary food premises):		
(g) Do you sell ready-to-eat* food at a different location from where it is prepared?	yes	no

* Refer to definitions below.

Definitions for the purposes of notification

Process, in relation to food, means activity conducted to prepare food for sale including chopping, cooking, drying, fermenting, heating, pasteurising, or a combination of these activities.

Note: This is not the same definition for process that is used in the food safety standards. Thawing and washing have been removed from this definition as these processes present a very low risk to food safety and are not relevant for the purposes of this form.

Ready-to-eat food means food that is ordinarily consumed in the same state as that in which it is sold and does not include nuts totally enclosed in the shell or whole fruit and vegetables intended for further processing by the customer.

Shelf-stable means non-perishable food with a shelf life of many months to years.

Small business is a business that employs less than 50 people in the ‘manufacturing’ sector or which employs less than 10 people in the ‘food services’ sector.

Note: When determining the number of employees of a business where casual and part-time employees are involved, their weekly hours are added together and divided by the number of hours per week stipulated in the award for employees of that business. Only staff involved in food handling operations should be included.

Location of all Food Premises		
Complete details of business location for all food premises within the jurisdiction of the enforcement agency.		
Trading name	Location	Contact numbers and details
		<input type="checkbox"/> (BH) _____ <input type="checkbox"/> (AH) _____ <input type="checkbox"/> Fax _____ <input type="checkbox"/> Email _____ _____
		<input type="checkbox"/> (BH) _____ <input type="checkbox"/> (AH) _____ <input type="checkbox"/> Fax _____ <input type="checkbox"/> Email _____ _____
		<input type="checkbox"/> (BH) _____ <input type="checkbox"/> (AH) _____ <input type="checkbox"/> Fax _____ <input type="checkbox"/> Email _____ _____
		<input type="checkbox"/> (BH) _____ <input type="checkbox"/> (AH) _____ <input type="checkbox"/> Fax _____ <input type="checkbox"/> Email _____ _____

Additional Notification Information for Mobile Food Vendors

Are you a mobile vendor (e.g. ice cream van) or do you vend permanently stationed at one site (e.g. after hours takeaway van)?

Mobile vendor / Permanently stationed vendor
(Please indicate)

For mobile vendors please provide the address at which the vehicle is normally garaged or housed:

For permanently stationed vendors please provide the address of the site:

Temporary Events Permit

Application Form

- 1 Name, location, date(s) and time(s) of event:

Name:

Location:

Date(s):

Time(s):

- 2 Name, address and postal address (if different) of company/body responsible for the event:

Name:

Address:

Postal address:

- 3 Name and contact details of event organiser/coordinator or person responsible for organising/coordinating food stalls:

Name:

Postal address:

Telephone: (business hours):

(after hours):

Mobile:

Fax:

4 Details of stalls and stall holders:

Name and/or number of stall	Name of stallholder or name of food business and proprietor	Address of stallholder or food business	Phone, mobile and fax numbers of stallholder/ food business	Types of food to be sold
			Ph: Mobile: Fax:	
			Ph: Mobile: Fax:	
			Ph: Mobile: Fax:	
			Ph: Mobile: Fax:	