

Food Act 2008 Notification/Registration Form

Are you a Not for Profit organisation?

- YES (Evidence must be attached e.g. Certificate of Incorporation)
 NO

New Business Change of ownership of existing business *Alteration to existing business

*Existing business name _____

*There are prescribed fees associated with the lodgement of this form under Councils' annual budget.

Please phone the City of Albany on 6820 3000 for further information.

*Alteration to existing business includes a change of name.

*A new business includes the change of address of an existing business, which must be inspected by an Environmental Health Officer prior to operation.

Proprietor/Business details

Proprietor Name: (May be a company name, but must also include the name of a person)		
Postal Address:		
ABN:		
Phone:	A/H:	Fax:
Email:		
Primary language spoken:	Number of equivalent full time staff:	

Premises details (if mobile or temporary food business please provide details of where the vehicle / marquee and equipment is stored)

Trading Name:
Address of Premises:
Phone:
Email:
Name of person in charge and title (if different from proprietor):
Details of food vehicle (make, model, registration plate):
Details of any associated premises:
Is your business' water supply: Scheme <input type="checkbox"/> Is your scheme water stored in a tank prior to use in your business? <input type="checkbox"/> YES <input type="checkbox"/> NO Bore water <input type="checkbox"/> Rain water <input type="checkbox"/> Other <input type="checkbox"/> (please describe)
*** If you have a combination system please tick all sources that are applicable.

Description of use of premises

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

- | | |
|-------------------------------------------------|---------------------------------------------------------------|
| <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"/> Temporary food premises |
| <input type="checkbox"/> Restaurant/café | <input type="checkbox"/> Mobile food operator |
| <input type="checkbox"/> Snack bar/takeaway | <input type="checkbox"/> Market stall |
| <input type="checkbox"/> Caterer | <input type="checkbox"/> Charitable or community organisation |
| <input type="checkbox"/> Meals-on-wheels | <input type="checkbox"/> 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

- | | |
|--------------------------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Prepared, ready to eat ¹ table meals | <input type="checkbox"/> Confectionary |
| <input type="checkbox"/> Frozen meals | <input type="checkbox"/> Infant or baby foods |
| <input type="checkbox"/> Raw meat, poultry or seafood (i.e. oysters) | <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 | |

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?		

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

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 ?		
To be answered by manufacturing/processing businesses 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			

If you are a temporary or mobile food vendor, do you give permission for your contact details to be passed on to event organisers? YES NO

Declaration:

I, the person making this application declare that:

- the information contained in this application is true and correct in every particular

Signature of applicant: _____

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

Date: _____

³ Standard 3.3.1 Australia New Zealand Food Standards Code