



Application for Food Business Licence

Food Safety Act 2006.

Privacy Notice: Mackay Regional Council is collecting this information in order to process your Application. Please be advised that Council under Legislation may be required to provide your details to a relevant State Department/Agency when requested or to a collection agency that has been employed by Council for the recovery of unpaid fees. In all other circumstances, this information will only be disclosed to a third party with your written authorisation or as required by law.

P: 1300 622 529 | **E:** council@mackay.qld.gov.au | **F:** 07 4944 2400 | PO Box 41 Mackay QLD 4740 | **ABN:** 56 240 712 069
CS Centres: Mon-Fri, 8:30am-4:30pm | Civic Precinct, Gordon St, Mackay | 65 Broad St, Sarina | 20 Victoria St, Mirani

For your application to be assessed you must:

- Complete all relevant sections;
- Provide all supporting information referred to on this form; and
- Submit with the relevant fee.

Contact council if you have any specific enquiries regarding fees or how to complete this form. Please type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply. Additional information is also available in the *Application for a Food Business Licence Information Sheet*.

Please note: incomplete applications may be refused or delayed.

SECTION A – APPLICATION TYPE

For an explanation of each application type, please see the Application for a Food Business Licence Information Sheet.

- NEW FOOD BUSINESS LICENCE**
- EXISTING FOOD BUSINESS LICENCE**
- AMENDMENT TO CURRENT FOOD BUSINESS LICENCE**

Please provide your existing Food Business Licence number, if applicable.

Existing Food Business Licence number: FL- --

SECTION B – TYPE OF FOOD BUSINESS

For an explanation of each food business type, please see the Application for a Food Business Licence Information Sheet.

- Fixed food premises Temporary food business – Type 1 Honey food business
- Home-based – Type 1 Temporary food business – Type 2
- Mobile food vehicle or water carrier Temporary food business – Type 3

SECTION C – APPLICANT DETAILS

This person will hold responsibility for compliance with the Food Act and Food Standards Code. An applicant other than an operator will be required to demonstrate their suitability to be an applicant under Section 52-59 of the Food Act 2006.

Title: Mr Mrs Ms Miss Other: --

Family Name: --

Given Name/s: --

Postal Address: --

Suburb: --

Post Code: --

Home Phone: --

Mobile: --

Email: --

If there is more than one applicant, please fill in the details of the second applicant here.

Title: Mr Mrs Ms Miss Other: --

Family Name: --

Given Name/s: --

Postal Address: --

Suburb: --

Post Code: --

Home Phone: --

Mobile: --

Email: --

SECTION D – BUSINESS DETAILS*Trading name must be registered with the Australian Securities & Investment Commission.*

Trading Name: --

ABN: --

Trading Address: --

Suburb: --

Post Code: --

Real Property Description (Lot/Plan): --

Business Phone: --

Business Fax: --

Mobile: --

Email: --

Postal address where you can receive legal documents.

Postal Address: --

Suburb: --

Post Code: --

Contact person for business if not the applicant and/or if the applicant is a company.

Contact Person: --

Position: --

Contact Phone: --

Email: --

SECTION E – CATEGORY OF FOOD BUSINESS*For an explanation of each category, please see the Application for a Food Business Licence Information Sheet. Tick all that apply.*

- | | | |
|---|--|---|
| <input type="checkbox"/> Accommodation meals | <input type="checkbox"/> Takeaway | <input type="checkbox"/> Food shop |
| <input type="checkbox"/> Bakery/patisserie | <input type="checkbox"/> Domestic water carrier | <input type="checkbox"/> Food manufacturer/packer |
| <input type="checkbox"/> Café/restaurant | <input type="checkbox"/> Service club | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Catering on-site | <input type="checkbox"/> Aged care facility/meals | <input type="checkbox"/> Food-vending vehicle |
| <input type="checkbox"/> Deli | <input type="checkbox"/> Beverage manufacturer/bottler | <input type="checkbox"/> Island resort |
| <input type="checkbox"/> Supermarket | <input type="checkbox"/> Catering off-site | <input type="checkbox"/> School canteen |
| <input type="checkbox"/> Fruit & vegetable processing | <input type="checkbox"/> Childcare centre | |

SECTION F – OPERATION DETAILS*Please attach a copy of your proposed menu with this application.*

Further information regarding the nature of the food business:

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Hours of operation: --

SECTION G – VEHICLE DETAILS*If there are additional vehicles, please attach additional vehicle information to this application.*Is this application for a mobile food vehicle or water carrier? Yes No

If yes, how many vehicles do you use? --

Make & Model: --

Registration Number: --

Make & Model: --

Registration Number: --

SECTION H – SUITABILITY OF PERSON TO HOLD A FOOD BUSINESS LICENCE

You must complete this section. Please identify if you or your staff have had any experience / training with the handling of food.

Skills and knowledge of applicant/s to sell safe and suitable food:

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If you answer yes to any of these questions, please attach details.

Have any of the applicants been convicted for a breach of any food legislation? Yes No

If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included.

Have any of the applicants previously held a licence under the *Food Act 2006*, the *Food Act 1981* or a corresponding law that was suspended or cancelled? Yes No

If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included.

Have any of the applicants been refused a licence under the *Food Act 2006*, the *Food Act 1981*, or a corresponding law? Yes No

If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included.

SECTION I – FOOD SAFETY SUPERVISOR

If you do not know the details of your Food Safety Supervisor/s, do not complete this section. This will not affect the decision made on your application. However, you are required to provide details of your Food Safety Supervisor/s within thirty (30) days of receiving your licence.

Title: Mr Mrs Ms Miss Other: --

Family Name: --

Given Name/s: --

Postal Address: --

Suburb: --

Post Code: --

Contact Number: --

SECTION J – COMMENCEMENT DATE

What is the intended date of commencing trade or completing alterations? --

Date to start trade: ___/___/___

Date to complete alterations: ___/___/___

SECTION K – EXISTING PREMISES AMENDMENT

If this is an amendment application, please specify the nature of the change:

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SECTION L – CURRENT APPROVAL DETAILS

Insert approval number for each approval type issued by local government. If any of these approvals are not required, you must provide documented evidence in support of this.

Approval Type	Approval Number	Office Use Only
Building	--	
Plumbing & Drainage	--	
Development	--	
Trade Waste	--	
Other – please specify	--	

SECTION M – ATTACHMENTS

Plans are required for any new premises where the activity has not been previously approved or where any significant alterations are proposed. Plans are not required for a licence amendment not involving structural alterations. Refer to Application for a Food Business Licence Information Sheet for detailed information about plan requirements.

Please provide:

1. Two (2) copies of the proposed plans (maximum A3 in size) showing:
 - a. Clearly marked scale (generally 1:100 or 1:200), with elevations and details not more than 1:50
 - b. Site plan with location of site in relation to surrounding land uses;
 - c. Floorplan with all equipment, fittings and fixtures with details on materials used;
 - d. Sectional elevations of all benches, equipment and fixtures; and
 - e. Mechanical exhaust ventilation plans.
2. Technical reports and other information such as brochures or photos can be attached as necessary to accompany plans;
3. Supporting information, e.g. menu and FSS Statement of Attainment.

SECTION N – APPLICANT CHECKLIST & DECLARATION

- Correct fee enclosed or paid
 - Two copies of all plans attached
 - Copy of menu attached
 - Copy of Food Safety Supervisor Statement of Attainment attached
- I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge and I have provided all information as requested;
 - I understand that information supplied on or with this application form may be disclosed publicly in accordance with the Right to Information Act 2009 and the Evidence Act 1977;
 - I am aware that it is an offence to knowingly provide false or misleading information.

Applicant Name: --

Signature:

Date: ___/___/___

PAYMENT OPTIONS

For a complete list of fees and charges, please refer to council's [Fees and Charges](#).

CREDIT CARD | We accept Visa or MasterCard. We do not accept American Express.

CHEQUE | Make your cheques payable to Mackay Regional Council.

CASH OR EFTPOS | You can pay at any of Council's Customer Service Centres.

OFFICE USE ONLY

Reference number: LC/H&RS/PP	Date:	Amount:
File number:	Receipt number:	Cashier: