

Food business application

Food Act 2003
 Section 84, 87 & 88

Food business type

- ☐ Notification to sell low-risk foods only (does not require registration under food business risk-classification system)
- ☐ Apply to register a food business
- ☐ fixed premises
- ☐ state-wide mobile food business (food van or food stall)

Applicant details

Name of applicant:

Company name:

ABN/ACN:

Date of birth:

Postal address:

Mobile number:

Email address:

Business details

Trading name:

Business address:

Food safety supervisor:

On-site contact:

Mobile number:

Proposed start date:

Hours of operation:

For mobile businesses

Type of structure:

Address where vehicle is garaged, or equipment stored:

Food vehicle registration number:

Food and food handling activities

List the types of foods to be sold (please attach details if insufficient space, a menu, or product list may suffice):

Types of food handling activities or processes to be used:

- | | |
|---|--|
| <input type="checkbox"/> No processing | <input type="checkbox"/> Cook-chill / sous vide |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Vitamising |
| <input type="checkbox"/> Cooling | <input type="checkbox"/> Packaging / repackaging / labelling |
| <input type="checkbox"/> Reheating | <input type="checkbox"/> Vacuum packing |
| <input type="checkbox"/> Hot-holding / cold-holding | <input type="checkbox"/> Preparation >4 hours in advance |
| <input type="checkbox"/> Other (specify): | |

☐ Provide allergen friendly options (specify):

Mobile food business layout, preparation, and storage

☐ Yes I have attached an A4 plan or photographs clearly showing the layout of my vehicle, cart, tent, booth, or other mobile structure. Refer to the Guidelines for Mobile Food Businesses for more information.

If any food sold from a mobile food business is to be prepared and/or stored at another location not mentioned above, please provide details, including the address of any premises where food is to be stored or prepared. Attach details if insufficient space:

Applicant declaration

1. I declare that the information provided on this form is accurate, complete, and correct.
2. I acknowledge that this application is not valid, and assessment of the application will not commence until the application fee is paid in full.
3. I acknowledge and agree that if an email address is provided on this application, I consent pursuant to Section 6 of the *Electronic Transaction Act 2000* to the Council using that email address as a method of contact and for the provision of information by the Council.
4. I understand and agree that information about this application and the businesses' on-going operations will be shared with Councils and the Department of Health to assess this application and the businesses' compliance with the *Food Act 2003*.
5. I understand that this is an application, and approval of this application is not guaranteed.

Name:

Signed:

Date:

Payment options

Payment by phone

Credit card payments can be made by calling (03) 6254 5000.

Payment in person

Payment can be made in person between 9:00am – 4:30pm Monday to Friday at –

Kempton Office - 85 Main Street Kempton 7030, 6254 5050

Oatlands Office - 71 High Street Oatlands 7120, 6254 5000

A full list of fees and charges can be found on council's website <https://www.southernmidlands.tas.gov.au/schedule-fees-charges/>

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