

Food Business details (if food business operates from a vehicle, please state where the vehicle is garaged)

Trading Name:					
ABN:					
Address of Premises:	Shop/Unit Street address				
	Suburb			Post code	
Preferred Mailing Address:					
Phone:			Fax:		

Email:

Proprietor details (the Proprietor	is the person or company who conducts or	r is in charge of the food business)
Proprietor Name:		
Postal Address:		
ABN or Date of Birth:		
Phone:	A/H:	Fax:
Email:		
Primary language spoken:	Number of equivalen	t full time staff:

Details of Site Manager (if different from Proprietor details)				
First Name(s):		Surname(s):		
Position Title:				
Postal Address:				
Date of Birth:				
Phone:	Primary language spoken:			
Email:				

Other Associated Activities:

Details of any other associated food businesses:

Details of food vehicle (make, model, registration plate): (only where food business operates from or operates food vehicles only)



What is your business type?			
Please tick all boxes that apply (there may be more than one)			
	Manufacturer/processor		Hotel/motel/guesthouse
	Retailer		Pub/tavern
	Food Service		Canteen/kitchen
	Distributor/importer		Hospital/nursing home
	Packer		Childcare centre
	Storage		Home delivery
	Transport		Temporary food premises
	Restaurant/café		Mobile food operator
	Snack bar/takeaway		Market stall
	Caterer		Charitable or community organisation
	Meals-on-wheels		(NB: Charitable or community organisations
	Other:		are except from payment of notification fee)

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

- Prepared, ready to eat' table meals
- Frozen meals
- Raw meat, poultry or seafood (i.e. oysters)
- Processed meat, poultry or seafood
- Fermented meat products
- □ Meat pies, sausage rolls or hot dogs
- Sandwiches or rolls
- Soft drinks/juices
- Raw fruit and vegetables
- Processed² fruit and vegetables

- Confectionary
- Infant or baby foods
- Bread, pastries or cakes
- Egg or egg products
- Dairy products
- Prepared salads
- Other:



What is the nature of your food business?

	Yes	No	
Are you a small business³?			
Is the food that you provide, produce or manufacture ready-to-eat			
when sold to the customer?			
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 ⁴ ?			
To be answered by manufacturing/processing businesses only	y:		
Do you manufacture or produce products that are not shelf			
stable ⁵ ?			
Do you manufacture or produce fermented meat products such			
as salami?			
To be answered by food service and retail businesses of	nly (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?			
Is this sold from a food vehicle?			
Number of Vehicles			
Registration No			
Vehicle make			

Notes:

- Ready-to-eat food food that is ordinarily consumed in the same state as in which it is sold
- Process activity conducted to prepare food for sale; including chopping, cooking, drying, fermenting, heating, pasteurising, or a combination of these
- ³ **Small business** Is a business that employs less than 50 people in the 'manufacturing sector' or less than 10 people in the 'food services' sector
- Vulnerable persons refer to Standard 3.3.1 Australia New Zealand Food Standards
 Code
- ⁵ Shelf stable non-perishable food with a shelf life of many months to years



Hours of opera	on:
Monday	Friday
Tuesday	Saturday
Wednesday	Sunday
Thursday	

Recall contact:			
First name			
Last name			
Phone		A/H:	Fax:
Email			

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:

Notification / Registration Fees and Charges	
Exempted Food Business	No charge
Community or charitable organisation	
Commercial operator	
Prescribed fee	\$60

Contact Details:

City of Cockburn 9 Coleville Crescent Spearwood PO BOX 1215, Bibra Lake 6965 T: 08 9411 3444