|  |  |  |  |
| --- | --- | --- | --- |
| Licence Application  |  |  |  |
| Large Event - Sell food from a Temporary Premises | FOOD ACT 2008 |
| Applications must be lodged at least 2 weeks prior to the event, or they may not be processed.

|  |
| --- |
| **Applicant’s Details** |
| Name: | Phone: |
| Address: | Email: |
| Organisation: | ABN (if applicable): |
| \*All food businesses must be registered by their local government authority (LGA), unless exempt – for definitions, see overleaf. If your LGA is not the City of Cockburn, please attach a copy of your Food Business Registration Certificate. |
|  |  |  |  |  |
| **Event Details** |
| Event | Location | Date |
|  |  |  |
|  |  |  |

 |

|  |
| --- |
| Attachments |
| Zip folder with named sub folder for each vendor. Each sub folder to contain current:* Food business registration certificate
* Layout of food premises
* Certificate of currency for public liability insurance.

Please email completed form and zip folder to health@cockburn.wa.gov.au  |

 A single invoice will be raised to the application (invoice will not be raised to individual food vendors)

|  |
| --- |
| Temporary Food Premises |
|  | Exempted Food Business\*  | NO CHARGE |
|  | \*A community or charitable fund raising activity, selling low risk, shelf stable food, or food which is thoroughly cooked onsite for immediate consumption. |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Commercial Operator Daily event fee | $25 | Annual event fee must be paid by each vendor prior to submitting the application. |  |
|  | Each additional day (same event)Additional late fee (for applications received less than 2 weeks prior to the event) | $5$25 |  |

|  |
| --- |
| Payment Details |

* Await payment advice from Health Services
* Payment must be made at least two (2) business days prior to the event.

|  |
| --- |
| **Details of Food Vendors** |
| Food vendor Name  | Proprietor Name | Mobile Number | Email Address | Annual Payer |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |
|  |  |  |  | Yes / No |

Zip folder with named sub folder for each vendor. Each sub folder to contain current food business registration certificate, layout of food premises and certificate of currency for public liability insurance. Please email completed form and zip folder to health@cockburn.wa.gov.au