

## Temporary Food Stall Food Business Licence Application

*Food Act 2006*

**Collection Notice:** Council requires the personal information requested on this form for the purpose of assessing your application and administering licenses and approvals in the region. The information will not be disclosed to any other party unless required by law.

**Application is for:**

- ☐ Temporary up to 7 days
 ☐ Temporary annual (12 months)
- ☐ Amendment - minor

OFFICE USE ONLY

Applicable fee: \$

Please provide existing food business licence number and expiry date (if applicable)

Existing licence number: Expiry:

**Applicant/s details (for a company or registered organisation)**

Company name: ACN/ ARBN/ IA:

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other (specify)

Family name:  
Given names:  
Position:

I declare that I have the authority to sign on behalf of the company or registered organisation and that the information provided in this application to be true and correct.

Signature: Date: / /

**Applicant/s details (for individual/s)**

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other

Family name:	Family name:
Given names:	Given names:
Position:	Position:

I declare that the information provided in this application to be true and correct.

Signature:	Signature:
Date: / /	Date: / /

**Applicant contact details**

☐ Business ☐ Private

Contact person:		
Postal address:		
Locality/ Suburb:	State:	Postcode:
Phone:	Mobile:	
Fax:	Email:	

**OFFICE USE ONLY**

Receipt number:	Date:
Assessment number:	Lot/Plan:

## Temporary Food Stall Food Business Licence Application

*Food Act 2006*

### Business details (only business names registered with the Office of Fair Trading can be used)

Business name:		ABN:
Street address:		
Locality/ Suburb:	State:	Postcode:
Postal address (if different):		
Locality/ Suburb:	State:	Postcode:
Contact person:		
Phone:	Mobile:	
Fax:	Email:	
Road name:		
Description of food business: (e.g. fruit and vegetable, cooking demonstrations):		
Term for which licence is sought (date):		to

Does your business involve off-site catering? ☐ Yes ☐ No

Do you deliver food in a vehicle? ☐ Yes ☐ No

Do you handle or prepare food in the vehicle? ☐ Yes ☐ No

If yes, how many vehicles do you use? ☐ 1 - 5 ☐ 6 – 10 ☐ 11+

### Vehicle details

Make	Model	Registration Number

### Suitability of person to hold a licence

Detail skills and knowledge of applicants to sell safe and suitable food:

**NOTE:** For the following questions, 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 convicted for a breach of any food legislation?

☐ No ☐ Yes, please attach details

## Food Act 2006

☐ No ☐ Yes, please attach details

☐ No ☐ Yes, please attach details

Food safety supervisor training details:
Name:
Address:
Business hours contact number:
Qualification acquired (please tick appropriate and provide a copy with application):
<input type="checkbox"/> THHGHS01B / SITXOHS002A / SITXFSA101 <input type="checkbox"/> THHBCC11B / SITXFSA001A / SITXFSA201
<input type="checkbox"/> WRRLP6C <input type="checkbox"/> Other (specify)

Provide details of proposed amendments and plans (if required)

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## Temporary Food Stall Food Business Licence Application

*Food Act 2006*

### Attachments for applications requiring design assessment

Item	Yes	No	N/A
1. Site plan, drawn to scale not less than 1:100, showing the food premises location, waste storage, food premises layout and equipment items used.			
2. Full explanation of selected box/es in the suitability of person to hold a licence section (if applicable).			
3. A copy of the nominated food safety supervisor's qualifications.			

### Site plan for temporary food stall