

## Application for Food Premises Registration/Change of Details

### A1. Approval Type

Application is hereby made for:

- Permanent Food Premise (restaurant, cafes, clubs, supermarkets and others)
- Mobile Food Van (van is housed within the Tweed Shire)
- Home-based business

Date Effective

**NOTE!** *New businesses which have not had a 'fit out approval' may be required to complete an "Application for Approval of Food Premises Fit-out Plan" or "Application for Home Based Food Business (Home Occupation)" form.*

### A2. Application Type

- New Business (not currently registered with Tweed Shire Council).
- Existing Business:
- Existing Business changing ownership
  - Existing Business changing details (business name, contact details etc.)
  - Existing Business proposing minor changes of the premises fit out. Please specify the proposed minor changes to the fit out:

**NOTE!** *Major changes to the premises fit-out (including. layout changes, mechanical ventilation etc.) will require an "Application for Approval of Food Premises Fit-out Plan" to be lodged.*

### A3. Application Details

Business Trading Name	<input type="text"/>		
Surname/s	<input type="text"/>	Given Name/s	<input type="text"/>
<b>OR</b>			
Company/ Organisation	<input type="text"/>	ABN	<input type="text"/>
Applicants Address	<input type="text"/>	Postal Address	<input type="text"/>
Contact No.	<input type="text"/>	Email	<input type="text"/>
Driver Licence No.	<input type="text"/>	State of Issue	<input type="text"/>

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## A4. Registered Details (existing business only)

Business Trading Name	<input type="text"/>		
Business Address	<input type="text"/>	ABN	<input type="text"/>
If <i>mobile</i> Residential Address of Operator	<input type="text"/>		
Operators	<input type="text"/>		
Postal Address	<input type="text"/>		

## A5. New Business Details

Business Trading Name	<input type="text"/>		
Business Site Address	<input type="text"/>		
Food Safety Supervisor	<input type="text"/>		
Food Certificate Number	<input type="text"/>		
Number of full-time equivalent (FTE) food handlers*	<input type="text"/>		
<b>Business Type</b>			
<input type="checkbox"/> Bakery	<input type="checkbox"/> Supermarket	<input type="checkbox"/> Newsagency	<input type="checkbox"/> Licensed Club
<input type="checkbox"/> Cake Shop	<input type="checkbox"/> Green Grocer	<input type="checkbox"/> Canteen	<input type="checkbox"/> Service Station
<input type="checkbox"/> Coffee Shop	<input type="checkbox"/> Convenience Store	<input type="checkbox"/> School Canteen	<input type="checkbox"/> Variety Store
<input type="checkbox"/> Bookshop Cafe	<input type="checkbox"/> Delicatessen	<input type="checkbox"/> Pharmacy	<input type="checkbox"/> Food Manufacturer
<input type="checkbox"/> Restaurant	<input type="checkbox"/> Poultry Shop	<input type="checkbox"/> Sushi Shop	
<input type="checkbox"/> Takeaway	<input type="checkbox"/> Seafood Shop	<input type="checkbox"/> Pub/Hotel/Tavern	
Type of foods handled. List the type of ingredients/food/drinks handled to be sold:			
<input type="text"/>			

**NOTE!**

\* To calculate the number of FTE food handlers your business has, add up all the hours that the food handlers are undertaking food handling activities during a working week and divide by 38 hours (average working week).

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## A6. Land Description

Lot Number	<input type="text"/>	Section	<input type="text"/>	DP/NPP/SP	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>
Unit/Street No	<input type="text"/>	Street	<input type="text"/>		
Suburb/Town	<input type="text"/>				

## A7. Application Checklist - please provide the following documents attached to your application

- Form is completed – applications may be returned if all information is not provided.
- Copy of the NSW Food Safety Supervisor Certificate if required.
- Copy of the vehicle registration for mobile food business.
- Copy of the fit out application form and fit out plans if required.

## A8. Privacy and Personal Information Protection Notice

I declare that all the information in this application is true and correct.

Some information requested by Council for this form constitutes personal information under the *Privacy and Personal Information Protection Act 1998* (NSW).

Purpose of Collection: For Council to carry out certification work for the applicant.

Intended Recipients: Council staff, Government agencies

Supply: Legally required, Council may not be able to accept your application if information is not provided.

Right of Access / Correction: Contact Council (02) 6670 2400 or email [tsc@tweed.nsw.gov.au](mailto:tsc@tweed.nsw.gov.au)

Storage details: Tweed Shire Council, 10-14 Tumbulgum Road, Murwillumbah NSW 2484

Consequence of non-provision of information: Failure to provide correct business details is a breach of the Food Safety Standards.

Applicants Name	<input type="text"/>	Date	<input type="text"/>
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