

# Shire of Brookton

## ***Food Act 2008***

### Notification/Registration Form

#### PART A: FOOD BUSINESS DETAILS

##### Proprietor/Business details

|   |                                       |      |
|---|---------------------------------------|------|
| Proprietor Name:<br><i>(Full names or corporate name)</i> |                                       |      |
| Postal Address:   |                                       |      |
| ABN:  |                                       |      |
| Phone:  | A/H:                                  | Fax: |
| Email:  |                                       |      |
| Primary language spoken:                                  | Number of equivalent full time staff: |      |

##### Premises details

|  |
|--|
| Trading Name:  |
| Address of Premises <i>(if food vehicle/temporary food business please provide details of where the vehicle is garaged):</i> |
| Phone:   |
| Email:   |
| Name of person in charge and title (if different from proprietor):   |
| Details of food vehicle (make, model, registration plate):   |
| Details of any associated premises:  |

##### Description of use of premises

*Please tick **all** boxes that apply (there may be more than one)*

- |   |   |
|---|---|
| <input type="checkbox"/> Manufacturer/processor | <input type="checkbox"/> Hotel/motel/guesthouse |
| <input type="checkbox"/> Retailer               | <input type="checkbox"/> Pub/tavern             |
| <input type="checkbox"/> Food Service           | <input type="checkbox"/> Canteen/kitchen        |

- |   |   |
|---|---|
| <input type="checkbox"/> Distributor/importer | <input type="checkbox"/> Hospital/nursing home                |
| <input type="checkbox"/> Packer               | <input type="checkbox"/> Childcare centre                     |
| <input type="checkbox"/> Storage              | <input type="checkbox"/> Home delivery                        |
| <input type="checkbox"/> Transport            | <input type="checkbox"/> Temporary food premises              |
| <input type="checkbox"/> Restaurant/café      | <input type="checkbox"/> Mobile food operator                 |
| <input type="checkbox"/> Snack bar/takeaway   | <input type="checkbox"/> Market stall                         |
| <input type="checkbox"/> Caterer              | <input type="checkbox"/> Charitable or community organisation |
| <input type="checkbox"/> Meals-on-wheels      | <input type="checkbox"/> Other _____                          |

**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*

- |  |   |
|--|---|
| <input type="checkbox"/> Prepared, ready to eat <sup>1</sup> table meals | <input type="checkbox"/> Confectionary            |
| <input type="checkbox"/> Frozen meals                                    | <input type="checkbox"/> Infant or baby foods     |
| <input type="checkbox"/> Raw meat, poultry or seafood (i.e. oysters)     | <input type="checkbox"/> Bread, pastries or cakes |
| <input type="checkbox"/> Processed meat, poultry or seafood              | <input type="checkbox"/> Egg or egg products      |
| <input type="checkbox"/> Fermented meat products                         | <input type="checkbox"/> Dairy products           |
| <input type="checkbox"/> Meat pies, sausage rolls or hot dogs            | <input type="checkbox"/> Prepared salads          |
| <input type="checkbox"/> Sandwiches or rolls                             | <input type="checkbox"/> Other:                   |
| <input type="checkbox"/> Soft drinks/juices                              |   |
| <input type="checkbox"/> Raw fruit and vegetables                        |   |
| <input type="checkbox"/> Processed fruit and vegetables                  |   |

**Nature of food business**

|   | Yes | No |
|---|-----|----|
| Are you a small business <sup>2</sup> ?   |     |    |
| Is the food that you provide, produce or manufacture ready-to-eat <sup>1</sup> when sold to the customer? |     |    |

<sup>1</sup> 'Ready to eat' means food that is ordinarily consumed in the same state as in which it is sold

<sup>2</sup> Is a business that employs less than 50 people in the 'manufacturing sector' or less than 10 people in the 'food services' sector

|   |  |  |
|---|--|--|
| 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 <sup>3</sup> ?   |  |  |
| <b>To be answered by manufacturing/processing businesses only:</b>  |  |  |
| Do you manufacture or produce products that are not shelf stable?   |  |  |
| Do you manufacture or produce fermented meat products such as salami?   |  |  |
| <b>To be answered by food service and retail businesses only (including charitable and community organisations, market stalls and temporary food premises):</b> |  |  |
| Do you sell ready-to-eat food at a different location from where it is prepared?  |  |  |

**Hours of operation:**

|           |  |          |  |
|-----------|--|----------|--|
| 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
- the prescribed fee is enclosed with this application (see Part B).

**Signature of applicant\*:** \_\_\_\_\_

\*In the case of a company, the signing officer must state position in the company

**Date:** \_\_\_\_\_

The information gathered in this form will be used for purposes related to the administration of the *Food Act 2008*. In accordance with regulation 51 of the *Food Regulations 2009*, certain details (proprietor name, trading name and address details) may be made publicly available.

---

<sup>3</sup> Standard 3.3.1 *Australia New Zealand Food Standards Code*

**PART B: PAYMENT OF PRESCRIBED FEE OPTIONS**

|   |                            |
|---|----------------------------|
| Registration fee                                | \$115 (not subject to GST) |
| Notification fee (exempt food businesses only): | \$TBA (not subject to GST) |