Existing Food Premises Assessment Application

Food Act 2006



Change of ownership of existing food business operating under a current licence held by another party excluding food stalls

Application fees are not refundable if application is w cancelled or refused	vithdrawn,	Given name/s	
☐ Application Application assessed within 30 days from receipt	\$508.00	Mr □ Mrs □ Ms □ Dr	Other
☐ Urgent application Application assessed within 10 days from receipt	\$620.00	Given name/s	
1. Current Licensee Surrender of Licence		Given name, s	
Current food business licence number:		Residential address	
I / We being the holder/s of the certificate of Food Licence, the particulars of which are set out in this hereby make application to surrender the certifica Business Licence held in our name/s.	document,	Postal address (if differen	Postcode at from above)
Please insert the signature/s of the current licensee (ver food business below:	ndor) of the		
Print Name			Postcode
		Home phone no.	Mobile phone no.
Current Licensee/s Signature 1			
Date		Complete For Registered ABN / ACN:	Entity/Company Only:
Print Name		Company or incorporated	d association's Name
Current Licensee/s Signature 2 (if applicable)			ngement committee names of (attach additional sheet if more room
Date			
2. Applicant Details: (Complete For Individual Applicant Only)		Corporations address or associations nominated	f registered office or incorporated address:
Mr □ Mrs □ Ms □ Dr □ Other			
Surname	<u>'</u>		Postcode

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Postal address (if different fa	rom above)	6. Suitability of Person t	o Hold a Licence:			
	Postcode		on or an incorporated association, executive officer of the corporation on's management committee.			
Phone no.	Mobile phone no.		been convicted for an offence Food Act 2006 or corresponding rritories?			
E-mail		☐ Yes ☐ No				
B. Electronic Authorisa	ation	Have any of the applicants previously held a licence under the <i>Food Act 1981</i> , <i>Food Act 2006</i> or corresponding law in other States and Territories that was suspended or cancelled?				
	now offers the option of having your	☐ Yes ☐ No				
	rrespondence and information sent to horise Council to send you information	Have any of the applicants previously been refused a licenunder the <i>Food Act 1981, Food Act 2006</i> or corresponding law?				
I. Contact Person:		☐ Yes ☐ No 7. Nomination of Food S	Safety Supervisor:			
On-site contact person nam	ne:	Name				
On-site phone no.	On-site mobile no.	Business Hours Contact Phone	Number			
E-mail		Qualification				
5. Business Details: Business Name (trading name)	me)	Safety Supervisor Competen Safety Supervisor and provid	tainment of an Accredited Food cy. You must nominate a Food le a copy of the Certificate of days of receiving your licence.			
Business Address		8. Types of Food to be H	landled:			
		☐ Fish / Seafood Products ☐ Fruit / Vegetables	☐ Confectionary ☐ Raw Meats / Frozen Meats /			
	Postcode	☐ Sandwiches	Poultry □ Cooked Meats			
Business phone no.	Business mobile no.	☐ Eggs ☐ Hamburgers / Sausages ☐ Milk / Ice cream / Yoghurt	☐ Chilled / Frozen Foods ☐ Ice ☐ Meat Pies			
Business E-mail		/ Cheese ☐ Bakery Products	☐ Rice / Pasta			

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9. Approved Fit Out of Premises

☐ As the new applicant for the existing food premises, I declare that no alterations or changes have occurred to the approved fit out of the food premises.

Please note: a minor/major alteration application (HEF348) must be submitted for approval if any alterations to the fit-out were made.

10. Attachments:

Please tick to confirm you have provided the following attachments with this application.

☐ **Menu** – please provide a copy of the proposed menu;

☐ **Food Safety Supervisor certification** – please provide Food Safety Supervisor certification for all nominated Food Safety Supervisors;

☐ Food Safety Program (for caterers, private hospitals & businesses supplying food to vulnerable persons)

A Food Safety Program is required to be submitted to Council for accreditation with the relevant application form (HEF243) and fee if required in accordance with the *Food Act 2006* or *Food Safety Standard 3.3.1 Food Service to Vulnerable Persons* detailed in the *Australia New Zealand Food Standards Code*.

11. Declaration:

If you have not told the truth in this application, you may be liable for prosecution under the *Food Act 2006*.

- I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge.
- I understand that Gympie Regional Council collects personal information where it is directly related to a function or activity of Council and where the collection of such information may be reasonably considered as necessary for that purpose. It will only use personal information for that purpose, and will not disclose it, except as permitted under the Information *Privacy Act* 2009.
- I understand that public availability of information supplied on or with this application can be restricted only after the confidentiality of information has been tested by application through the Right to Information Act 2009, and that the information supplied on or with this application may be used in accordance with the Evidence Act 1977.

Print	Name			
Appli	cant Signa	ture 1		

Date					
Print Name					
Applicant S	ignature 2	(if appli	cable)		
Date					

Privacy Statement

Gympie Regional Council collects personal information in accordance with our Information Privacy Policy, a copy of which is available from the Council website. In providing your personal information eg. name and contact details, please note that due to aspects of electronic communications outside of Council's control, you are agreeing to the possible transfer of your information outside Australia under s33 of the Information Privacy Act 2009

How to lodge this form with Council

Applications can be made either in person at 29 Channon Street, Gympie (8:30am – 4:30pm) or via email to health@gympie.qld.gov.au. Invoices are issued to applicants upon receipt of the application and payment can be made online at: payments.gympie.qld.gov.au

Please be advised assessment of your application does not occur until Council receives invoice payment.

Where to for further information

Should you require further information regarding Food Business Licence requirements, please do not hesitate in contacting Council's Environmental Health Services Section on telephone 1300 307 800, by email health@gympie.qld.gov.au, or visiting Council's website www.gympie.qld.gov.au.