

# Food Business Licence Application

Please complete parts A, B, C, D, E, F, G, H – as indicated

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Fixed (new or refit) – A, B, E, G, & H | <input type="checkbox"/> Fixed (existing) – A, B, E, & G <input type="checkbox"/> | <input type="checkbox"/> Mobile/Charter Vessel – A, B, C, E, G & H | <input type="checkbox"/> Temporary/Market Stall – A, B, D, E, G & H        |
| <input type="checkbox"/> Water Carrier – A, C & G               | <input type="checkbox"/> Amendment – A, F & G                                     | <input type="checkbox"/> Plan Approval – A, F, G & H               | <input type="checkbox"/> Accreditation of a Food Safety Program – A, E & G |

### Part A: Applicants Details

Company/ Incorporated Association Name	ABN/ACN*
Name of Company Directors or Incorporated Association Management Committee Members	Postal Address of Company/Incorporated Association
Phone	Mobile
Fax	Email Address

\*The applicant is required to provide a copy of the Business Registration Certificate

### OR (Not Both)

Individual/s Full Name* (MR/MRS/MS/MISS)	Full Postal Address
Phone	Mobile
Fax	Email Address

### Food Business Details

Trading Name of Business	Contact Person
Site / Business Address	Real Property Description (Lot Plan)
Phone	Mobile
Fax	Email Address

**Correspondence:** Chief Executive Officer, Whitsunday Regional Council, PO Box 104, Proserpine, QLD 4800

**P:** 1300 WRC QLD (1300 972 753)    **F:** (07) 4945 0222    **E:** info@whitsundayrc.qld.gov.au    **www.whitsundayrc.qld.gov.au**

## Description of Food Business

Please indicate uses that apply:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Bakery              | <input type="checkbox"/> Bars                            | <input type="checkbox"/> Bed and Breakfast             |
| <input type="checkbox"/> Charter Vessel      | <input type="checkbox"/> School/Nursery/Childcare Centre | <input type="checkbox"/> Delicatessen                  |
| <input type="checkbox"/> Fruit Stall         | <input type="checkbox"/> Home Based Business             | <input type="checkbox"/> Manufacturer                  |
| <input type="checkbox"/> Mobile Food Vehicle | <input type="checkbox"/> Motel/Hotel                     | <input type="checkbox"/> Nursing Home/Private Hospital |
| <input type="checkbox"/> Packer              | <input type="checkbox"/> Off site Catering               | <input type="checkbox"/> On site Catering              |
| <input type="checkbox"/> Restaurants         | <input type="checkbox"/> Takeaway                        | <input type="checkbox"/> Water Carrier                 |

## Water Source

- |  |  |
|--|--|
| <input type="checkbox"/> Town water supply | <input type="checkbox"/> Bore water              |
| <input type="checkbox"/> Rain water tank   | <input type="checkbox"/> Water will be delivered |

Water treatment details: \_\_\_\_\_

**(NOTE: If not connected to town water supply, water test results from a NATA Accredited Laboratory need to be provided with your application. Water is required to be tested for the following parameters: E.coli, arsenic, cadmium, chromium, copper, fluoride, lead, manganese, mercury, nickel, nitrate, nitrite, pH and turbidity).**

## Part B: 'Off-site Catering' / Food Transport Details

**'Off-site catering' in relation to a food business, mean serving potentially hazardous food at a place other than the principal place of business.**

Does the business involve off-site catering?

- No  
 Yes (provide details of food transport vehicle/s below)

If yes, how many vehicles do you use?

Vehicle Make

Vehicle Make

Vehicle Model

Vehicle Model

Registration No.

Registration No.

## Part C: Mobile Food Premises (Mobile Food Vehicle / Charter Vessel / Water Carrier)

**One licence is required for each mobile premises to operate throughout all of Queensland. Prior to operating in other Local Government areas, a licensee must notify each Local Government prior to operating.**

Vehicle Description  
(caravan, ice cream van, etc)

Vehicle Make

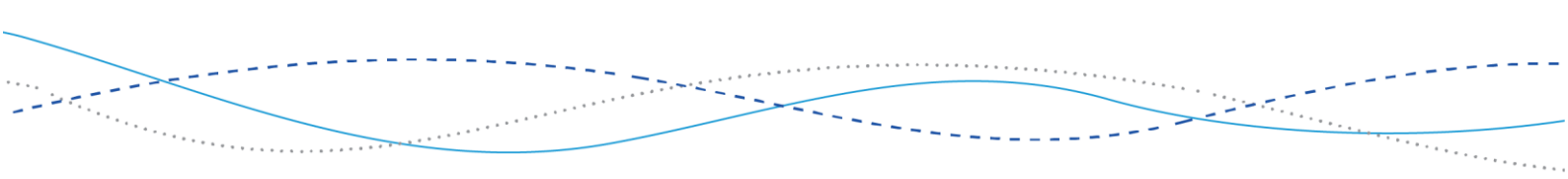
Vehicle Model

Registration No.

State/Territory of Registration

Year of Vehicle/ Vessel Manufacture

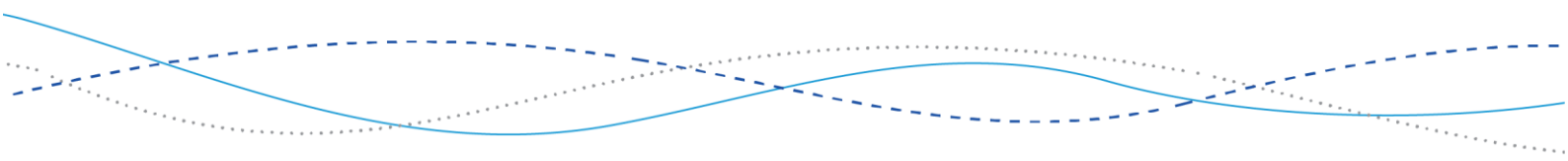
Address Where Vehicle/Vessel will be located



<p>Water Tank Capacity</p> <p>Tank Construction Material</p> <p>Is a backflow prevention device fitted?</p> <p>Hose Material (please attach certification)</p>	<p>Waste Water Tank Capacity (for mobile vehicle)</p> <p>Interior Surface Material of Tank (please attach certification)</p> <p>Type of Delivery Pump Used</p> <p>Water Source</p>	<p><input type="checkbox"/> Town Water</p> <p><input type="checkbox"/> Other - <input type="checkbox"/> Chlorinated <input type="checkbox"/> Non-Chlorinated</p> <p>Location: _____</p>
<p>Locations Expected to Operate (mobile food vehicle/ charter vessel)</p> <p>Will any food preparation/cooking be occurring at a fixed premises (e.g. home or commercial kitchen)?</p> <p>Will any food be provided by a caterer?</p>	<p><i>For charter vessels will the vessel provide short term (e.g. day trips) or long term (e.g. overnight trips) services?</i></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes – if yes please provide details below</p> <p>Address: _____</p> <p>Licence No: _____ Expiry Date: _____ Issuing Council: _____</p> <p>Details of food to be prepared/cooked: _____</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes – if yes please provide details below</p> <p>Address: _____</p> <p>Licence No: _____ Expiry Date: _____ Issuing Council: _____</p> <p>Details of food to be prepared/cooked: _____</p>	

### Part D: Temporary Food Premises / Market Stall

<p>Description of food/s to be prepared/sold at the markets (e.g. lamb rolls cooked and prepared at markets)</p> <p>Is this licence for a one-off event only?</p> <p>Will any food preparation/cooking be occurring at a fixed premises (e.g. home or commercial kitchen)?</p>	<p><input type="checkbox"/> No <input type="checkbox"/> Yes – if yes please provide details below</p> <p>Event name: _____ Event location: _____</p> <p>Start date: _____ End date: _____</p> <p>Hours of operation: _____</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes – if yes please provide details below</p> <p>Address: _____</p> <p>Licence No: _____ Expiry Date: _____ Issuing Council: _____</p> <p>Details of food to be prepared/cooked: _____</p>	
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## Part E: Food Safety Programs

**Higher risk food businesses are required to have a Food Safety Program. To see if your licensable food business requires a Food Safety Program please refer to Queensland Department of Health website at <https://www.health.qld.gov.au/public-health/industry-environment/food-safety/programs>**

**Please select the relevant box that suits your type of Food Business:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Offsite Catering   | <input type="checkbox"/> Onsite Catering   | <input type="checkbox"/> Private Hospital |
| <input type="checkbox"/> Aged Care Facility | <input type="checkbox"/> Child Care Centre | <input type="checkbox"/> Other: _____     |

**If you have selected any of the above, a Food Safety Program needs to be submitted as part of this application. Please tick below and ensure additional fee is included.**

- Food Safety Program Attached with Approved Auditors Written Advice

## Part F: Amendment of Existing Licence

### Details of Amendment Requested

## Part G: Suitability of Person to Hold a Licence

Have any of the applicants been convicted (other than a spent conviction) for a breach of any food legislation<sup>1</sup>?  Yes\*  No

Have any of the applicants previously held a licence that had been suspended or cancelled under any food legislation<sup>1</sup>?  Yes\*  No

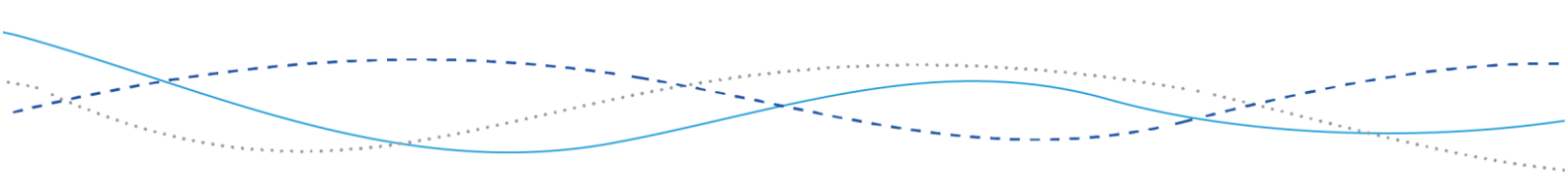
Have any of the applicants ever been refused a licence under any food legislation<sup>1</sup>?  Yes\*  No

\*Provide details and circumstances for all applicants (including applicants, directors, or management committee members)

<sup>1</sup>Any food legislation refers to the Food Act 2006, the Food Act 1981 or a corresponding law.

### Adequate Skills and Knowledge

Please provide details of the applicant's ability to sell safe and suitable food. This may include past experience in the food industry or qualifications etc.



## Food Safety Supervisor

All licensable food businesses are required to have a Food Safety Supervisor that is reasonably available to the Food business at all times. Food Safety Supervisors must hold competencies relevant to the industry in which they are working.

A copy of the Statement of Attainment/Certificate of Completion from a Registered Training Organisation must be provided within 30 days of your licence being issued.

## Food safety supervisors' details

Name	Address
Business Hours Contact No.	

## Part H: Plan Approval

**To ensure the design of the premises complies with the Food Standards Code – Standard 3.2.3 Food Premises and Equipment, a plan approval assessment must be completed by an Environmental Health Officer. Plans must be approved prior to construction or fit-out of a premises.**

**Please refer to the Design and Fit Out Guide to ensure compliance with the Food Standards and Food Act 2006.**

**An application for a new food premises or alteration to an existing food premises (e.g. construction or refit) must be accompanied by the following information:**

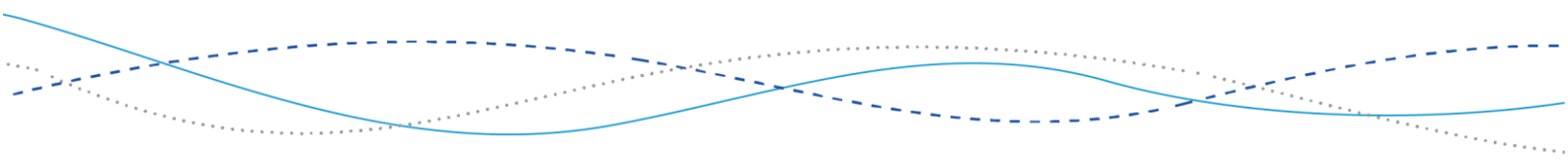
**Total Floor Area\*:** \_\_\_\_\_ m<sup>2</sup>

*\*Definition of floor area: Floor areas mentioned are the gross floor area associated with the premises used for manufacturing, preparing, handling, storage and the sale of food as well as toilets and refuse areas. It does not include car parks, dining areas or areas required for the storage and sale of retail pre-packaged foods (e.g. grocery section of a supermarket).*

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Site Plan (scale of 1:100)      | <input type="checkbox"/> Floor plans (scale of 1:50)          | <input type="checkbox"/> Elevations of each room (scale of 1:50)        |
| <input type="checkbox"/> Hydraulic Plans (scale of 1:50) | <input type="checkbox"/> Process flow diagram (scale of 1:50) | <input type="checkbox"/> Mechanical exhaust ventilation (scale of 1:50) |

**Walls** (page 16 – 18 of Design and Fit Out Guide)

Location (including height from floor)	Fit Out Material	Indication on Plans?
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## Floors (page 29 – 31 of Design and Fit Out Guide)

Location (including height from floor)	Fit Out Material	Indication on Plans?
<i>e.g. Wash up area</i>	<i>Ceramic tiles with epoxy grout</i>	

## Coving (NOTE: featheredge skirting or aluminium coving is NOT compliant) – page 14 – 15 of Design and Fit Out Guide)

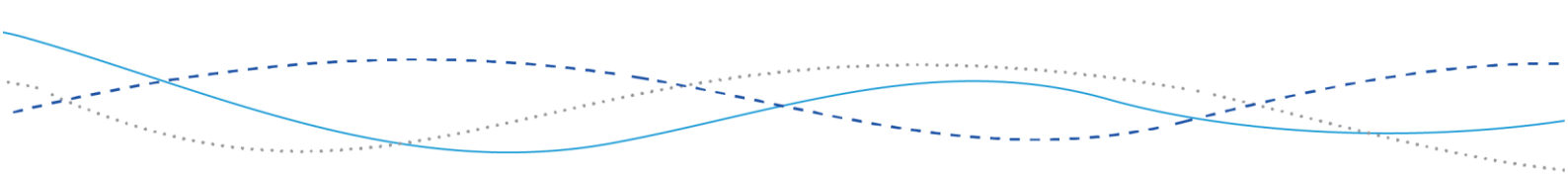
Location (including height from floor)	Fit Out Material	Indication on Plans?
<i>e.g. Food preparation area</i>	<i>Ceramic tile coving with epoxy grout</i>	

## Ceilings (page 17 – 19 of Design and Fit Out Guide)

Location	Fit Out Material	Indication on Plans?
<i>e.g. Entire kitchen</i>	<i>Plasterboard ceiling, white, high gloss</i>	

## Cooking Equipment

Appliance Description	Total Maximum Power Input (kW) / Total Gas Input (MJ/h)	Under Exhaust Canopy?
		Yes / No
		Yes / No
		Yes / No
		Yes / No
		Yes / No



## Mechanical Ventilation (page 29 – 31 of Design and Fit Out Guide)

Location	Fit Out Material	Indication on Plans?	Provision of Form 15
<i>e.g. Over cooking equipment</i>	<i>Must meet the requirements of Australian Standard 1668.2</i>		

## Washing Facilities (page 29 – 31 of Design and Fit Out Guide)

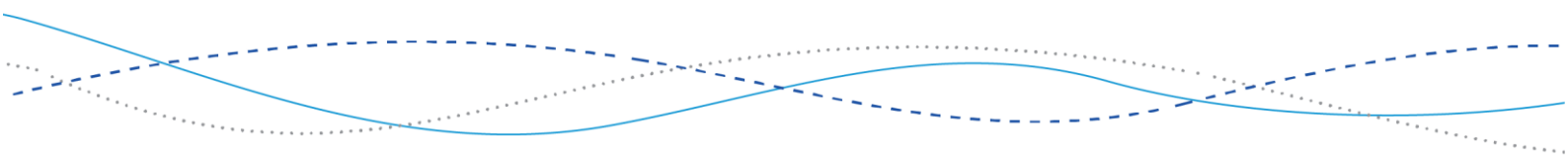
Details of Sink and Fixtures	Indicated on Plans?	Dishwasher Total Maximum Power Input (kW) or Total Gas Input (MJ/h)
<i>e.g. Design, capacity and location of sinks, dishwashers etc. This includes hand washing, food preparation and washing/sanitising facilities</i>	<i>Plasterboard ceiling, white, high gloss</i>	<i>Note: for commercial dishwashers please check the requirements of Australian Standard 1668.2</i>

## Storage Facilities – Food (page 24 – 27 of Design and Fit Out Guide)

Location	Fit Out Material	Indication on Plans?
<i>Note: this includes food display e.g. cold display – front of kitchen</i>		

## Storage Facilities – Equipment, Chemicals and Personal Items (page 39 of Design and Fit Out Guide)

Location	Fit Out Material	Indication on Plans?
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**Sewerage and Waste Water** (page 36 of Design and Fit Out Guide – please also consult with Council’s Trade Waste Officer and Plumbing Officer)

Location	Approved Connection	Indication on Plans?
<i>e.g. Drainage points, incl grease trap size and location</i>		

**Garbage and Waste Storage** (page 37 – 38 of Design and Fit Out Guide)

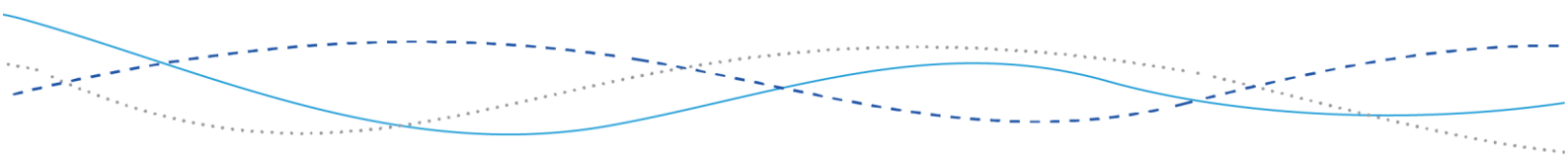
Type of Bins	Location	Indication on Plans?
<i>e.g. Bulk skip bin/ wheelie bin</i>		

**Pest Control Measures**

Location	Frequency	Contractor
<i>e.g. Entire premises</i>	<i>Quarterly</i>	<i>Contractor or DIY</i>

**Additional Information**

<i>e.g. Provide details of refit</i>
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## Applicant Declaration

Name of Individual/  
Company/ Incorporated  
Association

Name and Position of  
Signatory (if applicant is a  
company or incorporated  
association)

Signature

Date

I/We, the applicant, sincerely declare that the above information is correct in all respects, at the time of lodgement of this application with the Whitsunday Regional Council.

I/We shall advise the Whitsunday Regional Council in writing prior to any such change being implemented if any of the details given in relation to this application be changed in the future.

I/We understand that information supplied on or with this application form may be disclosed publicly in accordance with the Right to Information Act 2009 and the Evidence Act 1977.

I/We hereby make application for a food business licence under the *Food Act 2006* as set out in this form.

***Please refer to Council's current Fees and Charges for applicable fees.***

