# Application to Register a Food Premises

## Food Act 1984

### Proprietor Details

<table>
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<tr>
<th>Title:</th>
<th>Mr</th>
<th>Mrs</th>
<th>Miss</th>
<th>Ms</th>
<th>Other -</th>
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<td>Given Name:</td>
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<td>Surname:</td>
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<td>Authority <em>(if Pty Ltd - eg. Director)</em>:</td>
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<td>Business Name <em>(if Pty Ltd)</em>:</td>
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<td>Email:</td>
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### Premises Details

| Trading Name: |  |  |  |  |  |
| Street Number: |  |  |  |  |  |
| Street: |  |  |  |  |  |
| Town: |  |  |  |  |  |
| Postcode: |  |  |  |  |  |
| Type of Food Premises *(eg. café, take away, supermarket)*: |  |  |  |  |  |

- **Do you do any offsite catering?**
  - ☐ Yes  ☐ No
- **Do you sell at stalls / markets?**
  - ☐ Yes  ☐ No
- **What type of water supply does your premises use?**
  - ☐ Reticulated  ☐ Private
- **Do you sell Tobacco over the counter?**
  - ☐ Yes  ☐ No
- **Do you sell Tobacco from a vending machine?**
  - ☐ Yes  ☐ No
- **Do you have a liquor licence?**
  - ☐ Yes  ☐ No
- **Do you have on-premises dining?**
  - ☐ Yes  ☐ No

**If YES, what is the maximum number of seats provided for on-premises dining?**  

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Page 1 of 4
Food Activity Details
The answers to this section will determine the classification of your food premises – Class 1, 2 or 3.

1. Are you a wholesaler / distributor of pre-packaged food?  ☐ Yes  ☐ No  
   If YES, is this the only food handling activity at you premises?  ☐ Yes  ☐ No  
   
   If YES, you are classified as a Class 3. Go to section ‘Classification’ (pg 3).

2. Is the food prepared exclusively for people or patients in an aged care service, hospital, or meals on wheels service?  ☐ Yes  ☐ No  
   
   If YES, you are classified as a Class 1. Go to section ‘Classification’ (pg 3).

3. Is the food prepared or served exclusively for children at a childcare centre?  ☐ Yes  ☐ No  
   If YES, is the food high risk?  ☐ Yes  ☐ No  
   
   If YES, you are classified as a Class 1. Go to section ‘Classification’ (pg 3).

4. Are you a greengrocer that only sells fruit, vegetables and/or unpackaged foods?  ☐ Yes  ☐ No  
   If YES, Do you prepare fruit salad, fruit juice or salads?  ☐ Yes  ☐ No  
   
   If YES, you are classified as a Class 2. Go to section ‘Classification’ (pg 3).
   If NO, do you cut / slice fruits and vegetables?  ☐ Yes  ☐ No  
   
   If YES, you are classified as a Class 3. Go to section ‘Classification’ (pg 3).
   If NO, you only need to complete the Notification Form. Please contact Council.

5. Do you handle food that does NOT require refrigeration?  ☐ Yes  ☐ No  
   Is any of the food pre-packaged?  ☐ Yes  ☐ No  
   Is any of the food being prepared / made and sold directly to the public?  ☐ Yes  ☐ No  
   Is any of the food being manufactured on the premises to be sold to retail shops / wholesale / distributor?  ☐ Yes  ☐ No  
   Is any of the food being re-packaged?  ☐ Yes  ☐ No  

6. Do you refrigerate, cook and/or reheat food?  ☐ Yes  ☐ No  
   Is any of the food pre-packaged?  ☐ Yes  ☐ No  
   Is any of the food unpackaged?  ☐ Yes  ☐ No  
   Is any of the food being prepared and sold directly to the public?  ☐ Yes  ☐ No  
   Is any of the food being manufactured on the premises to be sold to retail shops / wholesale / distributor?  ☐ Yes  ☐ No
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Contact Person (if not Proprietor)

Title: Mr Mrs Miss Ms Other -

Given Name: ___________________________ Surname: ___________________________

Phone (w): ___________________ Phone (h): ___________________ Phone (m): ____________

Email: ______________________________________________________

Classification

Following discussions with Golden Plains Shire Council about your food handling activities, select your food premises classification below:

☐ Class 1 ☐ Class 2 ☐ Class 3


Food Safety Program (Class 1 and Class 2 Premises only)

Acknowledgement

☐ By ticking this box, I acknowledge that there is an appropriate Food Safety Program for the food premises that is available at all times, and appropriate records are being completed as specified in the Food Safety Program.

1. Do you have a Standard Food Safety Program? ☐ Yes ☐ No

   If YES, please select the type of FSP that your business adopts and proceed to section: Food Safety Supervisor.
   
   ☐ Food Safety Program Template for Class 2 Retails & Food Service Business No 1 Version 2
   ☐ FoodSmart (online)
   ☐ Other FSP template registered by the Secretary of Department of Health

2. Do you have a Non Standard Food Safety Program (Independent FSP)? ☐ Yes ☐ No

   If YES, has the premises been audited by a DOH approved food safety auditor in the last 12 months? ☐ Yes ☐ No

   ☐ If YES, please provide a copy of the report with this application.

Food Safety Supervisor (Class 1 and Class 2 Premises only)

☐ Please attach a copy of certificate of competency or course booking receipt.

Name of Food Safety Supervisor: __________________________________________

Course code (as specified on competency certificate): ________________________________
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Proprietor Declaration

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge;
- This application forms a legal document and penalties exist for providing false or misleading information; and,
- That I will ensure that I keep the appropriate business related records (Food Safety Program or Class 3 Minimum Records) required under the Food Act for the premises.

If the business is owned by a sole trader or a partnership, the proprietor(s) must sign and print name(s).

If the business is owned by a company or association – the applicant on behalf of that body must sign and print their name.

Proprietor Signature: ___________________________  Proprietor Signature: ___________________________

Proprietor Name: ___________________________  Proprietor Name: ___________________________

Date: ___________________________  Date: ___________________________

Proposed Opening Date: ___________________________

Form Submission, Fee Payment and Privacy Information

2018 / 2019 Fee Schedule

☐ Class 1 - $900.00  ☐ Class 2 General - $825.00  ☐ Class 3 General - $570.00
☐ Class 2 Large (>10 staff) - $1,050.00  ☐ Class 3 Community Group - $225.00
☐ Class 2 Community Group - $225.00  ☐ Class 3 Wineries - $450.00

Completed forms must be returned to Golden Plains Shire Council by email; post; or in person at the Bannockburn Customer Service Centre at 2 Pope Street Bannockburn VIC 3331.

Fee payment can be made by: post or email (cheques are to be made out to Golden Plains Shire Council or credit card details can be provided below); phone (by ticking box below); or in person by visiting the Bannockburn Customer Service Centre.

Payment Method (email/post payments):

☐ Cheque  Credit Card Type:  ☐ Visa  ☐ Mastercard  ☐ Bankcard

Credit Card Number: ___________  ___________  ___________  ___________  ___________  ___________  Expiry Date: ___________  CCV: ___________

Cardholder’s Name: ___________________________________________  Signature: ___________________________________________

☐ Please contact me to arrange for fee payment to be made over the phone

Golden Plains Shire Privacy Statement – The Golden Plains Shire considers that the responsible handling of personal information is a key aspect of democratic governance, and is strongly committed to protecting an individual’s privacy. Council will comply with the Information Privacy Principles as set out in the Privacy and Data Protection Act 2014. Council has in place a standard operating procedure that sets out the requirements for the management and handling of personal information. If you have any queries regarding this Privacy Statement, please contact the Privacy Officer on (03) 5220 7111.