

APPLICATION TO REGISTER A FOOD PREMISES

I/We the undersigned, hereby apply to register registration under the provisions of the Food Act 1984 the premises described hereunder and depicted in the floor plan attached / lodged with Council

PROPRIETOR DETAILS:		
Name of applicant:		
• • • • • • • • • • • • • • • • • • • •	ompany name:	
ABN:		
Postal address:		
Contact numbers: Business phone:	Facsimile:	
Home phone:	Mobile:	
Email:		
PREMISES DETAILS:		
Trading name of business:		
Address of premises:		
Contact person at premises (if not the proprietor):		
Contact numbers: Business phone:	Facsimile:	
Home phone:	Mobile:	
COMMUNITY GROUPS:		
A community group is a non for-profit organisation or a person(s) under	aking a food handling activity solely for the nurnose of raising funds	
for charitable purposes or for a not for profit organisation.	aking a rood francing activity solely for the purpose of raising funds	
Are you selling unpackaged ready to eat high risk food?	• Yes • No • Other (class 4 food premises)	
If NO, you are classified as a class 3 OR 3A	food premises	
If YES, you will be classified as a class 2 food premises		
Are you selling high risk food for more than two consecutive days at a time and most food handlers are volunteers?		
☐ Yes • No If YES, you MAY require a Food Safety Supervisor		
DESCRIPTION OF USE OF PREMISES: (e.g. Commercial kitchen, restaurant, facility for the preparation of food to be sold from a mobile food vehicle, etc.)		
(e.g. Commercial kitchen, restaurant, facility for the preparation of food to be sold from a mobile food vehicle, etc.)		
Following discussion with Council about your food handling activities, select your food premises classification below as advised by your Council		
Classification: Class 1 Class 2 Class 3 Class 3A Class 4 Class 5 Class 6 Class 6 Class 6 Class 6 Class 6 Class 7 Class		
Number of staff: Primary langua		
Is Tobacco sold? Yes / No If so, only from a vending machine? Yes / No		
Does the premises have sit-in dining: Yes / No		
Does the premises have a license to sell liquor? Yes / No		
Food Safety Program (please complete this section		
*Refer to"Do I need a Food Safety Program?" on last p		
IfTemplate, please indicate	If Independent (non-standard), please indicate	
☐ Food safety program template for class 2 retail &	Name of Program:	
food service	Data of last audit	
□ Food Smart (online)	Date of last audit/	

☐ Other FSP template registered by the Secretary of Department of Health	Auditor Name:
Name of Program:	Registration No:
Registered number of Template:	
equired Food Safety Program documents	
There are no attachments requirements if you have a te ☐ Class 1 premises and Class 2 manufacturers – Cop copy)	emplate standard food safety program. y of the non-standard/ independent food safety program (1
	urrent certificate from an approved food safety auditor indicating
Food Safety Supervisor (Class 1, Class 2 and Class Please attach a copy of evidence of required qualif	
Name: Contact numbers: Telephone:	Facsimile:
Mobile:	i acsimile.
Email:	
Declaration	
I understand and acknowledge that:	
The information provided in this application is true and This application is a legal document and penalties application.	
If the business is owned by a sole trader or as a partner If the business is owned by a company or association – name.	rship, the proprietor/s must sign and print name/s. the applicant on behalf of that body must sign and print their
Applicant signature(s)	
Signature applicant/s	
Printed name/s	
DATE: / /	DATE: / /
classification for your business. Fees are flat (no pro-rate	Services Department to determine the appropriate fee and ta) and are paid in full upon initial application. Registrations are All food business classifications – with the exception of Class 4
Privacy Statement: This information is collected under Health purposes. It may be provided to the Department	r the requirements of the Food Act for enforcement and Public nt of Human Services for the same purposes, and for statistical treated in compliance with the Department of Human Services acy Act.

Lodgement

By Mail: Po Box 55 Towong VIC 3700 By Email:

info@towong.vic.gov.au

In Person:

Call to arrange an appointment

1300 365 222

DO I NEED A FOOD SAFETY PROGRAM? (FSP)

All Class 1 premises are required to have a non-standard food safety program.

All *manufacturers are required to have a non-standard food safety program.

All food services and retail food premises that conduct one or more high-risk food handling processes are required to have a food safety program. The high-risk food handling processes are:

- sous vide cooking below 75 °C
- handling of potentially hazardous foods without temperature control as described in the Australia New Zealand Food Standards Code (the Code)
- acidified or fermented foods/drinks
- preparing ready-to-eat foods containing raw eggs
- preparing ready to eat raw or rare minced or chopped meats
- preparing ready to eat raw or rare poultry or game meats
- off-site catering
- any complex food process activity that does not use temperature control as described in the Code.

* **Definition of manufacturers**: A manufacturer is a business that produces products for distribution beyond the local area.