

Assessment of premises, suitability of applicant, floor and elevation plans, scale of proposed food handling activities

Application fees are not refundable if a cancelled or refused	pplication is withdrawn,		agement committee names of n (attach additional sheet if more room
Application - food processing	\$834.00		
□ Application - no food processing eg. smoko van handling pre-made s and pies with limited food handling	\$625.00 ausage rolls		
Annual Licence and Inspection Fee i final inspection as per Fees and Cha		-	of registered office or Incorporated
. Applicant Details: (Complete For Individual Applicant O	nly)	associations nominate	d address:
Mr 🗆 Mrs 🗆 Ms 🗆 Dr 🗆 Other Surname			Postcode
		Postal address (if differe	ent from above)
Given name/s			
Mr 🗆 Mrs 🗆 Ms 🗆 Dr 🗆 Other Surname			Postcode
		Phone no.	Mobile phone no.
Given name/s			
Residential address		E-mail 2. Electronic Autho	risation
	Postcode	Gympie Regional Cou	ncil now offers the option of having y
Postal address (if different from above)		you via email. Do you electronically?	e correspondence and information ser authorise Council to send you inform
		No 🗆 Yes 🗖	
	Postcode	4. Contact Person:	
Home phone no. Mobile	phone no.	On-site contact person	name:
E-mail			
		On-site phone no.	On-site mobile no.
Complete For Registered Entity/Compa ABN / ACN:	ny Only:	E-mail	
	News		
Company or incorporated association's	s warne	3. Business Details:	
		Business Name (trading	name)
EF347	Pa	age 1 of 7	27/06/2
Mah!	- Feed Durantice (Vehicle) Feed D		

 Postcode

ffers the option of having your ndence and information sent to Council to send you information

Mobile Food Premise (Vehicle) Food Business Licence Assessment Application

(Printed copies are uncontrolled. It is the responsibility of each user to ensure that any copies of controlled documents are the current issue)

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Business Address	
	Postcode
Business phone no.	Business mobile no.
-	
Business E-mail	

4. Mobile Food Premise Details

Vehicle Type: (e.g. trailer, food truck)

Vehicle Registration Plate Number

Date

5. Suitability of Person to Hold a Licence:

If the applicant is a corporation or an incorporated association, then below also applies to an executive officer of the corporation or a member of the association's management committee.

Have any of the applicants been convicted for an offence under the *Food Act 1981*, *Food Act 2006* or corresponding law in other States and Territories?

🗆 Yes 🗆 No

Have any of the applicants previously held a licence under the *Food Act 1981, Food Act 2006* or corresponding law in other States and Territories that was suspended or cancelled?

🗆 Yes 🗆 No

Have any of the applicants previously been refused a licence under the *Food Act 1981, Food Act 2006* or corresponding law?

🗆 Yes 🗆 No

6. Nomination of Food Safety Supervisor:

Name

Business Hours Contact Phone Number

Qualification

□ Attached Certificate of Attainment of an Accredited Food Safety Supervisor Competency. You must nominate a Food Safety Supervisor and provide a copy of the Certificate of Attainment within thirty (30) days of receiving your licence.

7. Types of Food to be Handled:

□ Fish / Seafood Products	Confectionary	
Fruit / Vegetables	Raw Meats / Frozen Meats	
	/ Poultry	
Sandwiches	Cooked Meats	
🗆 Eggs	Chilled / Frozen Foods	
Hamburgers / Sausages	□ Ice	
□ Milk / Ice cream /	Meat Pies	
Yoghurt / Cheese		
Bakery Products	🗖 Rice / Pasta	

8. Attachments:

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

□ **Floor Plan** - drawn to a scale of 1:100 providing details of layout for all benches, basins and equipment storage (required for construction and licence of a New Mobile Food Premises only);

□ **Cross-section and Elevation Plans** - drawn to a scale of 1:50 to indicate details of finishes to walls, floors, and ceilings (required for construction and Licence of a New Mobile Food Premises only);

□ Supporting Information Checklist - New Mobile Food Premises – please provide a completed copy of the attached checklist;

□ Menu – please provide a copy of the proposed menu;

Mechanical Exhaust Ventilation Certification –

demonstrating compliance with AS1668.1 and AS1668.2 (if required);

□ **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



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accreditation with the relevant application form (HEF243) and fee if required in <u>www.foodstandards.gov.au</u> may assist you in preparing a food recall plan.

9. 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

Applicant Signature 1
Date

Print Name

Applicant Signature 2 (if applicable)

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.

Mobile Food Premises (Vehicle) Food Business Licence Assessment Application

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Supporting Information Checklist - New Mobile Food Premises Description of Materials/Finishes Please provide information on the type of materials and finishes of the proposed food premises.		
Coving:		
Description of how appliances/fixtures are mounted/ with metal legs, wheels or on plinths – list more than c	installed on flooring: (e.g. benches/shelving/refrigerators fitted one where applicable)	
Walls:		
Walls surface behind cooking equipment:		
Splash back surfaces:		
Ceilings:		
Floor to ceiling height: (mm)	Internal window sills: Splayed 45°C N/A	
Lighting: Recessed: Y N		
Description of Lighting:		
Benches: Fixed: Y N	Castors: Y Legs: Y N	
Benches Construction:		
Cabinets: Fixed: Y N	Castors: Y Legs: Y N	
Cabinets Construction:		
Temperature Control Appliances		
Fridge: Y N Freezer: Y N	Hot or cold display: Y N	
External cold/chiller room: Y N		
Do the temperature control appliances have adequat	re lighting? Y N	
Can your mobile food premise adequately keep pote transport? Y N	ntially hazardous food under temperature control during	

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If yes, please detail how potentially hazardous food will be kept under temperature control during transport? (e.g. generator, gas fridge)		
Gas Compliance		
Does your mobile food premise have	gas appliances? Y N	
If yes, Attach a current copy of a	current gas certificate for the mobile	e food premise.
Cooking Equipment List (include al (e.g. deep fryers, bain-maries, ovens, g		
Appliance Description	Power Output	Under Mechanical Ventilation Unit (Yes/No)
If you require more room, please attach further appliance information on a separate page.		
Cleaning Facilities		
Double bowl sink:	Size: (litres)	Drainage area: (m ²)
Dishwasher:	N	
Food preparation sink: Y	N Size: (litres)	Drainage area: (m ²)
Hand wash basin:	N Size: (litres)	Drainage area: (m ²)

Mobile Food Premises (Vehicle)

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Single spout: Y N				
Hand wash basi	Hand wash basin method of operation: (e.g. flick mixer / sensor hands free)			
Splash backs su	pplied above all sir	nks/basins: Y N		
			Size: (litres)	
	water storage tank			
	ter storage tank wi litate easy flushing		Size: (litres)	
	intate easy nushing	and cleaning.		
How will you so	urce the potable w	ater supply? (e.g. Council re	eticulated supply, rainw	vater tank water)
How will wastew	vater be appropria	tely disposed of?		
Washing Facilit	ties			
Dishwasher	Brand/Manufacturer:			
	Washing & Rinsing:			
	Action automatic:			
	Washes in one operation:			
	Rinse Details:			
	Water at 50°C with 50mg/kg Sodium Hypochlorite: or			
	Water at 75°C or higher.			
	Water heater:			
	Thermometer visible?			
Hot Water System				
Туре:	Type: Commercial Model No:			
Attached certification stating the system is adequate to supply continuous hot water at greater than 60°C at all points of use.				



Mechanical Exhaust Ventilation System			
Constructed/installed by:			
Name:	Phone:		
Company:	Address:		
You are required to attach a certificate from the installer specifying that the mechanical exhaust canopy complies with AS/NZS1668; The Use of ventilation and air conditioning in buildings – Mechanical ventilation in buildings, prior to final approval being issued.			
Pest Prevention (Describe how pests premises)	such as cockroaches, flying insects and rodents will be excluded from the		
Operation and Amenities Number of Employees:			
Staff and personal belongings storage	a: Description (type & location)		
Staff and personal belongings storage: Description (type & location)			
Cleaning equipment storage: Description (type & location)			
Garbage /waste storage facilities: Description (type & location)			
Office/paperwork storage: Description (type & location)			