

# Honey Manufacturing Food Business Licence Assessment Application

Food Act 2006

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



Application fees are not refundable if application is withdrawn, cancelled or refused

**Application** **\$65.00**

**Annual Licence and Inspection Fee is also required upon final inspection (\$68.00)**

Licensable honey processing in domestic premises is limited to the heating, filtration, pasteurising, ultrasonication, creaming, or dehydration of honey that is packaged for retail sale.

If the proposed licensable food handling activities exceed the above definitions or include addition of other ingredients the use of a compliant commercial kitchen will be required.

## 1. Types of Activities Proposed:

- Heating - to destroy yeast, dissolve crystals and decrease viscosity prior to filtration
- Filtration - to produce a clearer product;
- Pasteurization
- Ultrasonication, to reduce yeast cells
- Creaming, to produce fine crystals
- Whipping
- Dehydrating, to reduce moisture content

## 2. Applicant Details:

(Complete For Individual Applicant Only)

Mr  Mrs  Ms  Dr  Other

Surname

Given name/s

Mr  Mrs  Ms  Dr  Other

Surname

Given name/s

Residential address   
  
 Postcode

Postal address (if different from above)   
  
 Postcode

Home phone no.  Mobile phone no.

E-mail

**Complete For Registered Entity/Company Only:  
ABN / ACN:**

**Company or incorporated association's name**

**Director name/s or management committee names of incorporated association** (attach additional sheet if more room required)

**Corporations address of registered office or Incorporated associations nominated address:**

Postcode

**Postal address (if different from above)**

Postcode

Phone no.  Mobile phone no.

E-mail

## 3. Electronic Authorisation

Gympie Regional Council now offers the option of having your Food Business Licence correspondence and information sent to you via email. Do you authorise Council to send you information electronically?

- No
- Yes

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### 4. Contact Person:

On-site contact person name:

On-site phone no.

On-site mobile no.

E-mail

### 5. Business Details:

Business Name (trading name)

Business Address

.....  
.....  
Postcode

Business phone no.

Business mobile no.

Business E-mail

### 6. Relevant Approvals

Type	Approval Number
Building Approval	
Plumbing & Drainage Approval	
Development Approval	

### 7. 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

### 8. 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.

### 9. Honey products:

Please list proposed honey products below

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

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### 10. 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.
- Cross-section and Elevation Plans** - drawn to a scale of 1:50 to indicate details of finishes to walls, floors, and ceilings.
- Supporting Information Checklist - Honey Manufacturing Assessment Application** – please provide a completed copy of the attached checklist.
- Food Safety Supervisor certification** – please provide Food Safety Supervisor certification for all nominated Food Safety Supervisors.

### 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

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](mailto: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](http://payments.gympie.qld.gov.au)

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

### Supporting Information Checklist - Honey Manufacturing Assessment Application

#### Description of Materials/Finishes

Please provide information on the type of materials and finishes of the proposed food premises.

Floors:

Walls:

Splashback surfaces behind sinks:

Ceilings:

Lighting:

Recessed:  Y  N

Covers:  Y  N

Description of Lighting:

Benches Construction: (e.g. Laminex, stone)

#### Equipment List (include all)

Please list below all designated equipment used for food business purposes.

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.

Please note these items will be subject to inspection of wear and tear and replacement may be required if found to be in poor condition.

#### Food Handling Processing

Please provide a step-by-step explanation of honey processing activities.

#### Food Storage

Food and items used in the operation of the business should be stored separately to those intended for domestic use.

Please describe how equipment and utensils will be stored protected from contamination?

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<b>Food Business Operations</b>		
What is the scale of the proposed business? (e.g. how many bottles of honey manufactured in a week)		
Where do you intend on selling your honey products? (e.g. markets, online sales)		
<b>Cleaning Facilities</b>		
Double bowl sink: <input type="checkbox"/> Y <input type="checkbox"/> N	Size of each sink: (litres)	Drainage area of each sink: (m <sup>2</sup> )
Separate food preparation sink: <input type="checkbox"/> Y <input type="checkbox"/> N	Size: (litres)	Drainage area: (m <sup>2</sup> )
Hand wash basin: <input type="checkbox"/> Y <input type="checkbox"/> N	Size: (litres)	Drainage area: (m <sup>2</sup> )
Hand wash basin single spout: <input type="checkbox"/> Y <input type="checkbox"/> N		
Hand wash basin method of operation: (e.g. flick mixer / sensor hands free)		
<b>Washing Facilities</b>		
Dishwasher: <input type="checkbox"/> Y <input type="checkbox"/> N	Dishwasher highest temperature cycle: (°C)	
<i>Please note all plumbing work is required to comply with requirements of Council's Plumbing Department prior to commencement of use. Please contact Council's Plumbing Department on 1300 307 800 for further information.</i>		
<b>Hot Water System</b>		
Type:		
<b>Pest Prevention</b>		
Describe how pests such as cockroaches, flying insects and rodents will be excluded from the premises). <i>Please Note: Home-based food business should have measures in place to make sure pet animals are unable to access areas where food is handled.</i>		
<b>Cleaning equipment storage</b>		
Description (type & location)		
<b>Office/paperwork storage</b>		
Description (type & location)		
<b>Garbage /waste storage facilities</b>		
Description (type & location)		