



Application to Register a Food Premises

Food Act 1984

Overview

Please use this form to apply to Greater Shepparton City Council to register a new food premises under the Food Act 1984. This includes existing premises with a change of ownership.

The Food Act 1984 regulates the sale of food for human consumption. A summary of the five classes is listed below:

Food Risk Classification Summary	
Class 1	<ul style="list-style-type: none"> Hospitals, childcare centres and aged care services which serve high risk food
Class 2	<ul style="list-style-type: none"> Handling of high risk unpackaged foods (ie: restaurants/café) Manufacturing low risk food with allergen free claims
Class 3A	<ul style="list-style-type: none"> Accommodation getaway premises providing food as part of accommodation stay (ie: B&B, motels) Food made using a hot-fill process resulting in products such as jams, chutneys or any other similar foods
Class 3	<ul style="list-style-type: none"> Handling unpackaged low risk food Sale of potentially hazardous pre-packaged food Warehousing or distribution of packaged food Sale of shell eggs Making of sweet or savoury foods which do not require temperature control for safety (ie: biscuits, plain cakes)
Class 4	<p>Activities considered to be very low risk such as shelf stable pre-packaged foods, whole fruit and vegetables, some fundraising activities and low risks foods served in kindergartens.</p> <p><i>Please note: Class 4 food premises need to complete a notification form</i></p>

This application should be completed by **Class 1, 2, 3A or 3** premises only. Please complete all relevant boxes below:

Reason for Application: New premises Change of ownership – existing premises

Proposed Opening/Change of Ownership Date: _____

Proprietor Details

Type of Proprietor: Company Individual (Go to Page 2) Partnership (Go to Page 2)

Proprietor – Company/Organisation

Name of Company: (*See lodgement requirements on page 4)			
Contact person name:			
Position in Company (ie: Director)			
ABN and/or ACN: (Must match Company name listed on this application)			
Postal Address:			
Business Phone:		Mobile:	
Email:			
Are you a registered charitable organisation:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

If the proprietor is a company/organisation, go to **Premises Details** section on page 2

Proprietor – Individual			
Surname:		Given names:	
Postal Address:			
Business Phone:		Mobile:	
Email:			

Proprietor – Second Individual/Partner			
Surname:		Given names:	
Postal Address:			
Business Phone:		Mobile:	
Email:			

Premises Details			
Trading Name:			
Address of Premises:			
Postal Address:			
Business Phone:		Mobile:	
Type of food premise and description of food sold (attach a copy of menu):			
Trading Hours and Days:			
Preferred Language:		Number of food handling employees (full time equivalent): _____ <i>If employees are casual or part-time – determine number of full time equivalent – 38 hrs/week</i>	
Preferred method of contact for written information:		<input type="checkbox"/> Postal Delivery	<input type="checkbox"/> Email

Food Vehicle Details (if applicable)			
Registration Number:		Make, Model and Colour:	
What address is the vehicle garaged at when not in use:			

Premises Information		
Will you sell tobacco products:	<input type="checkbox"/> Yes – Over the Counter <input type="checkbox"/> Yes – Vending Machine	<input type="checkbox"/> No
Will you have dining available:	<input type="checkbox"/> Yes – Indoor dining <input type="checkbox"/> Yes – Outdoor dining	<input type="checkbox"/> No
Will you have a liquor licence:	<input type="checkbox"/> Yes – List type: _____	<input type="checkbox"/> No
What type of water supply is available:	<input type="checkbox"/> Mains	<input type="checkbox"/> Private

Classification

Following discussion with Council's EHO about your food handling activities, please tick the correct classification below:

Class 1 Class 2 Class 3A Class 3

Food Safety Program - Class 1 and 2 food premises only

Class 1 – Independent Food Safety Program (FSP) required. A copy of the FSP is kept at the premises.

Class 2 Manufacturers - Independent Food Safety Program (FSP) required. A copy of the FSP is kept at the premises.

Class 2 Food Service and Retail Premises – Will your business be doing any of the following food handling activities?
Please tick all that apply

- Sous vide cooking – *cooking at less than 75°C where the food is cooked under controlled temperature and time conditions inside vacuum sealed packages in water baths or steam ovens*
- Acidified/Fermented Foods – *examples: sauerkraut, kimchi, kombucha, vegetables preserved in vinegar*
- Ready to eat food or drink containing raw egg (unpasteurised) – *examples: aioli, mayonnaise, tiramisu, mousse*
- Off-site Catering – *catering where ready to eat potentially hazardous food is prepared or partially prepared in one location, transported and served at another location by the caterer*
- Making any potentially hazardous foods that does not involve temperature control – *examples: sushi, Chinese style meat, chicken and roast duck*
- Ready to eat raw or rare minced/finely chopped red meats, poultry and game meats – *examples: steak tartare, beef carpaccio, rare burger*
- Any other complex food processing activity – *examples: smoked foods, aged meat, dehydration, rehydration, modified atmosphere packaging of food, pasteurisation.*
- No to all activities

If No to all activities, your business is exempt from the requirement to have a Food Safety Program for the period of five years.

If your business will be doing any of the above food handling activities, it will require a Food Safety Program (FSP). Contact Council's Environmental Health Department to find out which type of FSP your business will require.

Type of Food Safety Program: (Tick relevant box)

Independent FSP Registered FSP Template (list the name): _____

Food Safety Supervisor – Class 1, 2 and 3A food premises only

Name of Food Safety Supervisor: (Attach copy of their Statement of Attainment)	
Address of Food Safety Supervisor:	
Contact Number:	

Payment Details

Registration fees are based on class of premises, size and category in which your premises fall. Registration period is 1 January to 31 December. Annual renewal fees apply.

An invoice will be issued once this form has been processed. Payment options will be provided on the invoice eg: in person, BPay and credit card online.

Declaration

Class 1, 2, 3A and 3 food premises

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge
- This application is a legal document and penalties exist for providing false or misleading information.

Class 3 food premises – warehouse/distributors only

In addition to the above and by ticking this box, I acknowledge that I will ensure that the appropriate minimum records required under the Food Act for the premises will be kept.

If the business is owned by a:

- Sole trader or partnership, the proprietor(s) must sign and print name(s)
- Company or association – the applicant on behalf of that body must sign and print their name.

Signature:

Signature:

Print Applicants Name:

Print Applicants Name:

Date:

Date:

Collection Notice

Greater Shepparton City Council manages your personal information in accordance with its Privacy Policy and the *Privacy and Data Protection Act 2014* (Vic). The “personal information” supplied on this application form is collected under the requirements of the *Food Act 1984*. This information may be disclosed to other areas of Council for the purposes of maintaining and updating your registration record and communicating with you in relation to your registration. It may also be provided to the Department of Health & Human Services for the same purposes and for statistical purposes related to the application of the Act or Regulation. If you do not provide the requested information we may be unable to process your application. To gain access to your personal information please contact the Health Department on 03 5832 9731.

Lodgement

When lodging this application please supply the following documents as supporting information:

- Business Name Registration Certificate
- ABN Registration Certificate

You can lodge your form by doing the following:

In Person: 90 Welsford Street Shepparton

Post: Locked Bag 1000, Shepparton VIC 3632

Email: council@shepparton.vic.gov.au