



Cloncurry Shire Council

FRM-IE3031-01

FOOD BUSINESS LICENCE

Information Privacy Act 2009 Cloncurry Shire Council is collecting your personal information in accordance with the *Local Government Act 2009*. The information collected on this form will be accessed by authorised Council officers or any other relevant State Government departments for the purpose of approving this application and ensuring Council records are accurate. Your information will not be accessed by any other person or agency unless you have given us permission, or we are required to do so by law.

Authorising Provisions:

Food Act 2006

Cloncurry Shire Council Planning Scheme 2016

SECTION 1: APPLICATION TYPE (please print)

- Application for Food Licence. Please select relevant category.
- New food business licence; or
 - New food business licence with Food Safety Program Accreditation; or
 - New food business licence with minor administrative change to licensee details.
- Amendment to existing licence. Please select relevant amendment category.
- Addition of food premise(s) to be added to an existing licence; or
 - Change to licence details; or
 - Change to licence conditions. Please specify licence conditions for amendment in an attachment; or
 - Food safety program accreditation.
- Application for replacement of current licence.

SECTION 2: APPLICANT DETAILS (please print)

Name			
ACN (if applicable)			
Postal Address			
Suburb		Postcode	
Phone no. (day)		Mobile no.	
Email			

SECTION 3: Business Details (please print)

Registered Business Name			
ACN/ABN			
Registered Business Address			
Registered Business Postal Address			
Authorised Business Representative			
Phone no. (day)		Mobile no.	
Email			

PREFERRED CONTACT PERSON'S DETAILS (if different to the above)

Name			
Address			
Postal Address			



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Suburb		Postcode	
Phone no. (day)		Mobile no.	
Email			

SECTION 4: FOOD SAFETY SUPERVISOR (FSS)

Do you have a FSS to nominate for this Food Business?

Tick ONE.

No **STOP APPLYING.**

Read the Queensland Government information (here: <https://www.qld.gov.au/health/staying-healthy/food-pantry/training-and-teaching-resources/food-safety-supervisors>) and find a Registered Training Organisation (RTO) to obtain certification as a Food Safety Supervisor.

Once you have obtained certification as a Food Safety Supervisor, you may recommence the application.

Note it is an offence to undertake unlicensed food services.

Yes (please attach to this application)

Note: If you have additional Food Safety Supervisor(s) to add please attached the details to the application form.

Name			
Postal Address			
Suburb		Postcode	
Phone no. (day)		Mobile no.	
Email			

SECTION 5: PROPERTY LOCATION (please print)

What is the primary location where the food business will be carried out?

If more than one location, provide details as an attachment.

For temporary premises, you need to provide details of any proposed locations of the premises to be used for this purpose.

Street			Street no.	
Suburb			Postcode	
Real Property Description	Lot no.		Plan type	
			Plan no.	

SECTION 6: VEHICLE DETAILS (please print)

Do you deliver food in a vehicle? Yes No

Do you handle or prepare food in the vehicle? Yes No

Do you serve food from a vehicle? Yes No

If yes, how many vehicles do you use? _____

Vehicle Information	
Type/Make/Model	Reg no.
Type/Make/Model	Reg no.
Type/Make/Model	Reg no.



SECTION 7: CURRENT APPROVAL DETAILS (please print)

Please insert your approval number for each approval type issued by Local Government

Approval Type	Approval No.	Office Use Only
Building approval		
Plumbing and drainage approval		
Development approval		
Trade waste approval		
Other- Please specify		

SECTION 8: APPLICANT SUITABILITY (please print)

Note: Where this application is in the name of a company, these questions apply to all the statutory officers of the Company. Where the application is made by individual(s) these questions also apply.

Attach a separate document detailing responses if further space is required.

1. Have you been convicted of an offence under any food legislation?

Tick ONE. If yes provide details.

- No
- Yes

2. Have you been issued with one or more penalty infringement notices under the Food Act 2006?

Tick ONE. If yes provide details.

- No
- Yes

3. Have you ever had a licence under the *Food Act 2006*, the *Food Act 1981* or a corresponding law that was suspended or cancelled?

Tick ONE. If yes provide details about the licence, when it was cancelled or suspended and the reasons why.

- No
- Yes

4. Have you been convicted of any offence under food legislation in another state or country?

Tick ONE. If yes provide details.

- No
- Yes



5. Have you owned or operated a business with activities similar to that for which you are making this application?

Tick ONE. If yes include details about size, location and nature of the operation.

- No
 Yes

6. Do any of your previous roles, responsibilities and education provide you with knowledge that may be relevant to your application?

Tick ONE If yes provide details.

- No
 Yes

SECTION 9: PERMISES SUITABILITY

Fixed/mobile premises → Premises suitability will be considered during this application as part of the assessment.

Temporary premises → Plans of the site layout will be required to be submitted

Have you attached plans of the temporary premises?

- No
 Yes (please attach to this application)

SECTION 10: CHECKLIST

- Originals of Food Safety Supervisor certificates sighted by Council authorised person.
- Additional nominations for Food Safety Supervisor attached if applicable.
- Company / Incorporated Association.
- Application form has been signed and completed.

Food Safety Program Requirements (if applicable):

If you require an accredited food safety program you will also need to submit with this application:

- Two (2) copies of the accredited Food Safety Program
- Written advice from an approved food safety auditor stating that the food safety program complies with the criteria in section 104 of the *Food Act 2006*.

Temporary Food Stall Plan/Layout Requirements (if applicable):

- Copy of floor plan/layout attached to this application (as per Qld Health – Design and fit-out guide for food businesses).



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SECTION 12: DECLARATION & SIGNATURE

Note: Providing false or misleading information in this application may lead to legal action or prosecution.

I declare that:

- I am the applicant or an authorised signatory for the applicant.
- The information provided is true and correct to the best of my knowledge. I understand that it is offence under Section 268 of the *Food Act 2006* to provide Cloncurry Shire Council or an authorised person, documentation containing information that I know is false, misleading or incomplete.
- I understand that all information provided with this application form may result in the application being refused.
- I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the *Right to Information Act 2009* and the *Evidence Act 1977*.

Applicant's full name			
Applicant's signature		Date	/ /

Note: If required information is not submitted in full within 20 business days of the date of the request, the application will be deemed incomplete and another Food Business Licence Application will be required with an additional fee.

SECTION 13: APPLICATION LODGEMENT

Applications may be lodged as follows:

- By email: council@cloncurry.qld.gov.au – scanned copy with signatures only
- By post: Mail to Cloncurry Shire Council, PO Box 3, CLONCURRY QLD 4824
- By fax: (07) 4742 1712
- Pay in person at: Cloncurry Shire Council Administration Centre,
38-46 Daintree Street, Cloncurry

COUNCIL USE ONLY

Name		Date received:
Signature		
Reference number		
Amount paid		
Receipt no.		