

65 Rankin Street
PO Box 154
MAREEBA QLD 4880
P 1300 308 461

W www.msc.qld.gov.au E info@msc.qld.gov.au

APPLICATION FOR FOOD BUSINESS LICENCE

Food Act 2006

Application for (tick where a	ipplicable)				
 New Licence Restoration of Licence Amendment of Licence/ Accreditation of Food Sa (The Written Advice for the 	afety Program	ust be submitted wit	th the Food Safety Pro	ogram for Acc	reditation)
APPLICANT CONTACT D	ETAILS				
Full Name (Proprietor/s) or Company Name (must include Pty Ltd)					
Postal Address					
Contact Phone Number/s					
Email Address		,			
FOOD BUSINESS DETAIL	S				
Company name (if applicable)					
Director/s name					
Trading name (if applicable)					
Contact Phone Number/s					
Email Address					
Postal address					
Description of Food Business (e.g. café, restaurant, cannery, etc.)					
Does your business involve and	y off-site or on-site cate	ring?		O Yes	O No
Mobile Vehicle Registration No	(if applicable)				
Address of Food Premises (include name of shopping centre, if applicable)					
Property Description (Lot and Plan)					
NOMINATION OF FOOD	SAFETY SUPERVIS	OR			
Name					
Address					
Contact Phone Number/s					

SUITABILITY OF PERSON TO HOLD A LICENCE									
NOTE: If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included (if any answer below is Yes, please supply details)									
Have any of the applicants been convicted for a breach of any food legislation?			Yes	0	No				
Have any of the applicants previously held a licence under the Food Act 2006, or corresponding law?			Yes	0	No				
Have any of the applicants been refused a licence under the Food Act 2006, the Food Act 1981 or a corresponding law?			Yes	0	No				
Skills and knowledge of applicants to sell safe and suitable food (include details of courses attended, certificates, etc)									
FEE CLASSIFICATIONS (R	Renewable 30 June each year)								
Food Licence									
 High Risk 	Accreditation of Food Safety Program								
 Medium Risk 	<i>,</i> — <u>— — — — — — — — — — — — — — — — — —</u>								
Low Risk	Amendment of Licence								
 Food Stall (Annual): 	 Amendment of Fo 	od Safety	Program	า					
High Risk	Replacement of Lie	cence							
o Medium Risk									
o Low Risk									
NOTE:									
	Risk Category as per The Priority Classification System for Food Business.								
 For fees, see Schedule of Fees and Charges on Council's website. 									
AMENDMENT DETAILS									
Please supply details of change	s required to your existing Licence.								
Name		Licence	No.						
Details									
APPLICANT DECLARATION									
I declare that the information provided by me in this application is true and correct.									
 I declare that the information provided by me in this application is true and correct. I understand failure to complete this form in full may delay the processing of the application. 									
Tanacistana fanare to con	processing of the applica								
Name									
Signature	Date								

Privacy Notice: Mareeba Shire Council is collecting applicant details in accordance with the *Food Act 2006 (Qld)* in order to assess your application. This information will only be accessed by Council employees and other persons authorised under the Food Act. Some of this information may be given to Queensland Health for the purpose of maintaining the register of mobile food licences. Your information will not be given to any other person or agency unless you have given us permission, or we are required by law.