



Food Act 2006
Application Form
Food Business Licence
2012 - 2013

To: Chief Executive Officer, Cairns Regional Council

Application for:

New Licence

Amendment of Licence (Section 5)

Restoration of Licence

Section 1 – Applicant's details *(Please print)*

Applicant Name (Person/s or Company):

Date of Birth:

Director/s name:

ABN:

Telephone:

Mobile:

Facsimile:

Email:

Applicant Address:

Postal Address:

Section 2 – Food Business Details *(Please print)*

Trading name:

Contact name for this application:

Telephone:

Mobile:

Facsimile:

Email:

Description of food business: *(eg café, restaurant, cannery etc)*

Types of food products: *(eg hamburgers, sushi etc)*

Hours of operation: *(eg 10am – 10pm, Tues - Sun)*

Does your business involve any off-site or on-site catering? : *(please circle)*

Yes

No

Address of food premises: *(include name of shopping centre, if applicable)*

Registration number of vehicle: *(applies to Mobile Food Vehicles only)*

Vehicle Identification Number (VIN): *(applies to Mobile Food Vehicles only)*

Real property description: Lot no.

Registered plan no.:

Section 3 – Nomination of Food Safety Supervisor

Name:

Business hours contact number:

If you have more than one food safety supervisor, please attach details and relevant contact information. In order to comply with the Queensland Health Guidelines your nominated Food Safety Supervisor/s will need to provide a certified copy of their Statement of Attainment for specified units of competency. (Refer to the Queensland Health website for further information www.health.qld.gov.au/foodsafety or contact Council's Environmental Health Unit)

Section 4 - Suitability of Applicant to Hold Licence (Please print)

Skills and knowledge of applicants to sell safe and suitable food: (Include details of courses attended, certificates, etc)

*Have any of the applicants been convicted for a breach of any food legislation? Yes No

*Have any of the applicants previously held a licence under the *Food Act 2006*, the *Food Act 1981* or a corresponding law? Yes No

*Have any of the applicants been refused a licence under the *Food Act 2006*, the *Food Act 1981* or a corresponding law? Yes No

* 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 above is Yes, please supply details)

Section 5 - Amendment Details (Please supply details of changes required to your existing Licence)

Name:

Licence Number:

I _____ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.

Signature of Applicant: Date:

Cairns Regional Council – Information Privacy Statement

Your personal information has been collected for the purpose of assessing your Application for a Food Business Licence including New, Renewal, Restoration & Amendment. The collection of your information is authorised under the **Food Act 2006**. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the *Information Privacy Act 2009* and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission or the disclosure is required by law.

Section 6 - Fee Schedule (N.B. Risk Category as per Priority Classification System)

* Former DSC

HIGH RISK:	\$ 652.50	\$ 496.00*
MEDIUM RISK:	\$ 630.00	\$ 475.00*
LOW RISK:	\$ 360.00	\$ 302.00*
AMENDMENT OF LICENCE:	\$ 102.00	
APPROVED CONCESSION: Not for profit community group, Bed & Breakfast, Sporting Group	\$ 307.00	
MINOR PREPARATION LICENCE: (at the discretion of Manager Environmental Assessment)	\$ 320.00	
RESTORATION OF LICENCE: Plus above fee	\$ 62.00	

NOTE: New financial fees apply for new applicants from 1 July 2012 to 31 December 2012 (Certificate issued until 30 September 2013) Pro- Rata \$

	Low	Med	High
2/3 fees 1 Jan 2013 to 31 March 2013	240	420	435
1/3 fees 1 April 2013 to 30 June 2013	120	210	218
* former DSC	Low*	Med*	High*
2/3 fees 1 Jan 2013 to 31 March 2013	200	316	330
1/3 fees 1 April 2013 to 30 June 2013	100	158	165

OFFICE USE	Receipt Code:	Fee Paid	Date	Receipt Number	Health Number
	T163 (New Applicant) or T80 (Existing Account)	\$			