

# Notification/change of details of food safety supervisor



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**ABN: 92 967 232 136**

## Food business details:

Name of food business:

Address of food business:

Name of licensee:

Food business licence number:

Daytime contact number:

food processing     retail and hospitality     health and community services     transport and distribution

## Food safety supervisor details:

Name:

Address:

Daytime contact number:

Details of qualification(must be attached to this form)

Do you have more than one food safety supervisor

Yes (complete the above details on a separate sheet and return with this form and a copy of their qualifications)

No

Provide details of national competency codes and attach copy of qualification to this form.

National competency codes must correlate with those approved by Qld health for food safety supervisors.

## Application type:

notification of new food safety supervisor

notification of changes to details of previously nominated food safety supervisor

Any change in details of the food safety supervisor must be provided within 14 days of the change

## Signature of licensee

I,  certify that the above information and the information on any attachments, to the best of my knowledge, is correct:

Signature of licensee:  Date:

### Privacy statement

Moreton Bay Regional Council is collecting your personal information for the purpose of maintaining food safety supervisor details. The collection of this information is authorised under the Food Act 2006. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.