

Southern Drive, Busselton WA 6280  
 All Correspondence to: The Chief Executive Officer,  
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# Food Business Notification/Registration Form

## Food Act 2008

**Application Fee: \$62.00**

**Food Business Details**     Notification     Registration     Change of Food Business Activity

Trading Name of Food Business		
Food Business Address:		
Postal Address:		
Business Ph:		Mobile:
Business Email:		
ABN:		

### Food Business Proprietors Details

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Other:
Name(s) of Proprietor: <i>Names(s) will appear on Certificate of Registration if applicable.</i>				
	Proprietor 1	Proprietor 2		
Address(es) of Proprietor:				
Proprietor Email Address:				
Proprietor Ph:				
Preferred Contact Person: For business and operational matter.				

### Nature of Business Information

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Manufacturer / Processor | <input type="checkbox"/> Hotel/Motel/Guesthouse  | <input type="checkbox"/> Retailer                    |
| <input type="checkbox"/> Pub/Tavern               | <input type="checkbox"/> Food Service            | <input type="checkbox"/> Canteen/Kitchen             |
| <input type="checkbox"/> Distribution/Importer    | <input type="checkbox"/> Hospital/Nursing Home   | <input type="checkbox"/> Packer                      |
| <input type="checkbox"/> Childcare Centre         | <input type="checkbox"/> Storage                 | <input type="checkbox"/> Home Delivery               |
| <input type="checkbox"/> Transport                | <input type="checkbox"/> Temporary Food Premises | <input type="checkbox"/> Café/Restaurant             |
| <input type="checkbox"/> Mobile Food Operator     | <input type="checkbox"/> Snack Bar / Take Away   | <input type="checkbox"/> Market Stall                |
| <input type="checkbox"/> Caterer                  | <input type="checkbox"/> Meals-on Wheels         | <input type="checkbox"/> Charitable / Community Org. |
| <input type="checkbox"/> Winery Cellar Door       | <input type="checkbox"/> Other: _____            | <input type="checkbox"/>                             |

Application No: HR:	Applic Path: Plus/HealthReg/HRFoodPrem	Risk Category: High/Medium/Low
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**Please provide a summary of your business type and product range:**

(For Example: butcher, bakery, seafood processor, soft drink manufacturer, milk vendor, service station)

**Do you provide, produce or manufacturer any of the following foods?**Please tick **ALL** boxes that apply (there may be more than one)

<input type="checkbox"/> Prepared / Ready to Eat <sup>1</sup> Table meals	<input type="checkbox"/> Confectionary	<input type="checkbox"/> Frozen Meals
<input type="checkbox"/> Infant / Baby Foods	<input type="checkbox"/> Raw Meat / Poultry / Seafood	<input type="checkbox"/> Bread / Pastries / Caked
<input type="checkbox"/> Fermented Meat Products	<input type="checkbox"/> Dairy Products	<input type="checkbox"/> Meat Pies / Sausage Rolls / Hot Dogs
<input type="checkbox"/> Prepared Salads	<input type="checkbox"/> Sandwiches / Rolls	<input type="checkbox"/> Soft Drinks / Juices
<input type="checkbox"/> Raw Fruit / Vegetables	<input type="checkbox"/> Processed Fruit / Vegetables	<input type="checkbox"/> Other: _____

**Nature of Food Business****Yes****No**

Are you a small business <sup>2</sup> ?		
Is the food that you provide, produce or manufacture ready to eat <sup>1</sup> when sold to the customer?		
Do you directly supply or manufacture food for organisations that cater to vulnerable persons <sup>3</sup> ?		

**To be answered by manufacturing / Processing Businesses only:**

Do you manufacture or produce products that are not shelf stable?		
Do you manufacture or produce fermented meat products such as salami?		

**To be answered by Food Service and Retail Businesses only (including charitable and community organisations, market stalls and temporary food premises):**

Do you sell ready-to-eat <sup>1</sup> food at a different location from where it is prepared?		
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**Hours of Operation:**

Monday		Tuesday		Wednesday	
Thursday		Friday		Saturday	
Sunday					

**Privacy:**

All information obtained on this form relating to manufacturing, commercial or processes remains confidential.

**Declaration:**

I, the person making this application declare that:

The information contained in this application is true and correct in every particular;

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

In the case of a company, the signing officer must state his/her position.



**Note:** The annual inspection fee is payable after risk assessment has been completed.

Fees according to the risk category are: High Risk: \$393.00, Medium Risk \$196.50, Low Risk \$92.00

- 1 Ready to eat<sup>1</sup> means food that is ordinarily consumed in the same state as in which it is sold
- 2 Is a business that employs less than 50 people in the 'manufacturing sector' or less than 10 people in the 'food services' sector
- 3 Standard 3.3.1 Australia, New Zealand Food Standards Code

**PAYING BY CREDIT CARD**

Please complete this authority and return it to: CITY OF BUSSELTON, Locked Bag 1, BUSSELTON WA 6280

TICK ONE BOX	<input type="checkbox"/>		<input type="checkbox"/>	
CARD NUMBER	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
EXPIRY DATE	____ / ____ / ____			
AMOUNT	\$ _____			
CARD HOLDER'S NAME	<input type="text"/>			
	_____			
	CARD HOLDER'S SIGNATURE			
	____ / ____ / ____			
	DATE			