

# FOOD BUSINESS REGISTRATION FORM

Notification Details			
<input type="checkbox"/> Commercial Business	<input type="checkbox"/> Home Business	<input type="checkbox"/> New Kitchen	
<input type="checkbox"/> Change of Ownership	<input type="checkbox"/> Kitchen Hire (provide a letter of consent from the owner)		
Food Business Details			
Trading Name			
Premises Address			
ABN		Email Address	
Phone Number		After Hours Number	
Number of equivalent full-time staff			
Proprietor Details			
Proprietor Name			
Postal Address			
Phone Number		Email Address	
Food Safety Supervisor Details (if different from Proprietor)			
Name			
Phone Number		After Hours Number	
Email Address			
Please provide a copy of all relevant certificates.			
Mobile Food Vehicle Details (if applicable)			
Vehicle/trailer Registration			
Make and model			
Details of any associated premises			
Please list details			
Description of use of Premises			
Please tick all that apply			
<input type="checkbox"/> Manufacturer/processor	<input type="checkbox"/> Snack bar/takeaway	<input type="checkbox"/> Childcare centre	
<input type="checkbox"/> Retailer	<input type="checkbox"/> Caterer	<input type="checkbox"/> Home delivery	
<input type="checkbox"/> Food service/catering	<input type="checkbox"/> Meals on wheels	<input type="checkbox"/> Temporary food premises	
<input type="checkbox"/> Distributor/importer	<input type="checkbox"/> Hotel/motel/guesthouse	<input type="checkbox"/> Mobile food operator	
<input type="checkbox"/> Packer	<input type="checkbox"/> Pub/tavern	<input type="checkbox"/> Market stall	
<input type="checkbox"/> Storage	<input type="checkbox"/> Canteen/kitchen	<input type="checkbox"/> Hospital/nursing home	
<input type="checkbox"/> Transport	<input type="checkbox"/> Charitable or community organisation		
<input type="checkbox"/> Restaurant/cafe	<input type="checkbox"/> Other		

Please provide more details about your type of business. Eg butcher, bakery, seafood processor, soft drink manufacturer, milk vendor, service station. If you are a catering business, please provide the estimated maximum number of patrons.

Do you provide, produce or manufacture any of the following foods? Please tick all that apply.

<input type="checkbox"/> Prepared, ready to eat table meals	<input type="checkbox"/> Processed fruit and vegetables
<input type="checkbox"/> Frozen meals	<input type="checkbox"/> Confectionary
<input type="checkbox"/> Raw meat, poultry or seafood (ie oysters)	<input type="checkbox"/> Infant or baby foods
<input type="checkbox"/> Processed meat, poultry or seafood	<input type="checkbox"/> Bread, pastries or cakes
<input type="checkbox"/> Fermented meat products	<input type="checkbox"/> Egg or egg products
<input type="checkbox"/> Meat pies, sausage rolls or hot dogs	<input type="checkbox"/> Dairy products
<input type="checkbox"/> Sandwiches or rolls	<input type="checkbox"/> Prepared salads
<input type="checkbox"/> Soft drinks/juices	<input type="checkbox"/> Other
<input type="checkbox"/> Raw fruit and vegetables	

### Nature of Food Business

<b>Are you a small business?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the food that you provide, produce or manufacture ready-to-eat when sold to the customer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you process the food that you produce or provide before sale or distribution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you directly supply or manufacture food for organisations that cater to vulnerable persons?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### To be answered by manufacturing/processing businesses only

Do you manufacture or produce products that are not shelf stable?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you manufacture or produce fermented meat products such as salami?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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 food at a different location from where it is prepared?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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### Hours of Operation

Monday		Friday	
Tuesday		Saturday	
Wednesday		Sunday	
Thursday		Public Holidays	

### What is the Size of Your Business?

Tick one box only

<input type="checkbox"/> Large food service	Employs over 50 people in food/retail service sector
<input type="checkbox"/> Medium	21 to 100 employees in food manufacturing/processing
<input type="checkbox"/> Medium food service	11 to 50 employees and more than one premises
<input type="checkbox"/> Small	1 to 20 employees in food manufacturing/processing sectors
<input type="checkbox"/> Small food service	1 to 10 employees and one food retail premises

Recall Contact			
Full name			
Phone Number		After Hours Number	
Email Address			
Food Safety Training			
<p>National Food Safety Standard 3.2.2A – Food Safety Management Tools, has been introduced across Australia to reduce the rate of foodborne illnesses linked to poor food handling in certain food services, retail and catering businesses.</p> <p>The standard introduces three food safety management tools for businesses that handle unpackage foods, potentially hazardous foods and ready-to-eat foods. The three tools include:</p> <ol style="list-style-type: none"> <li>1. Requirement to complete food handler training or demonstrate skills and knowledge in safe food handling practices</li> <li>2. Requirement to appoint a qualified food safety supervisor</li> <li>3. Requirement to show that your food is safe</li> </ol> <p>Please visit <a href="http://www.health.wa.gov.au/FSMT">www.health.wa.gov.au/FSMT</a> for more information.</p> <p>Please provide a copy of your Food Safety Supervisor certificate for all supervisors. All other food handlers are required to complete the Food Handlers Training Course. A record of all food safety training in required to be kept on-site and be made available to Authorised Persons.</p>			
Declaration			
<input type="checkbox"/>	I declare as the Applicant, all information contained in this application is true and correct		
<input type="checkbox"/>	I have included a fit-out plan with full layout if applicable		
<input type="checkbox"/>	I have attached a copy of the Food Safety Supervisor Certificate for all supervisors		
<input type="checkbox"/>	I understand that by registering my food business, it is my responsibility to ensure the premises and food handlers comply with the <i>Food Act 2008</i> , <i>Food Regulations 2009</i> and <i>Australia New Zealand Food Standards Code</i> .		
<input type="checkbox"/>	I have attached a copy of my ABN registration or ASIC company registration certificate		
Name			
Position			
Signature		Date	