

PRIVACY COLLECTION NOTICE Isaac Regional Council is collecting personal information you support this form in accordance with the Information Privacy Act 2009. personal information will be accessed by Council Officers who have authorised to do so. Your information will not be given to any other personal information is handled in accordance with the Information Privacy Act 2009.	Your been berson bught.
INSTRUCTIONS FOR FORM	
1. Use a BLACK or BLUE pen.	
2. Use BLOCK letters.	
3. This form is for MOBILE PREMISES ONLY.	
<ol><li>Read through all of the questions before beginning application.</li></ol>	your
<ol> <li>Applications that do not have required sect completed <u>will not be accepted or may be refused.</u></li> </ol>	
Please ensure you submit this application no more than thirty (30) before intended commencement of trade.	Fixed Premises – "Application for a Food Business Licence – Mobile
Commencing trade prior to receiving a Food Business Licence offence against the <i>Food Act 2006</i> and may result in legal a being taken against you.  Applications made by agents or consultants on behalf of applicant will be refused.	<b>Temporary Premises</b> – "Application for a Temporary Premises Food Business
ADDITIONAL REQUIREMENTS	Non-Profit Organisations" form.
I have spoken with Regulatory Services regarding Commercia of Roads:	
☐ YES ☐ NO (Contact Regulatory Services for advice)	Are you intending to conduct a low risk or low prep activity? (Q 11A and 11B)
I have checked whether I require a Plan Assessment Applica	
(see Q10):  ☐ YES ☐ NO (Check prior to proceeding with this application)	Are you intending to conduct a medium risk activity? (Q 11C)
, , , , , , , , , , , , , , , , , , , ,	☐ YES ☐ NO
Pre-lodgement advice and information is available upon req	Are you intending to conduct a high risk activity? (Q 11D)

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☐ YES

□ NO



#### BEFORE BEGINNING YOUR FOOD BUSINESS LICENCING APPLICATION

Question 1. Have you spoken with Regulatory Services about any requirements such as Commercial Use of Roads Permits?

	□ YES	□ NO	□ <b>N/A</b>
Have you spoken with			cil Lands, and you will need to d or state-controlled roads.
Regulatory Services?	You are still required to	comply with all other relev	ant legislation and local laws.
		Business Licence does n ner permits such as Com	ot automatically guarantee mercial Use of Roads.
Question 2. Have you spoken w Trade Waste requirements for t	•	es to discuss the B	uilding, Plumbing, and
2.1 Does any plumbing or drainage modifications or	□ YES	□ NO	
improvements need to be installed to existing design?		pgrading existing plumbing oval through Councils build	g or drainage, you will need an ing services

your business?

You must speak to Building Services about all plumbing, and trade waste requirements.

☐ YES

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2.2 Have you spoken about the **Trade Waste requirements for** 

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□ NO

Most activities will require a Trade Waste Permit. You must contact Building Services in relation to trade waste permits.



#### TYPE OF APPLICANT

Question 3. Who is making this application? (please tick one)

☐ An Individual / Sole Trader  Go to → Question 4	An individual responsible for the business.
☐ A Corporation  Go to → Question 5	Group or organisation recognised under the Corporations Act 2001.
<ul><li>☐ An Incorporated</li><li>Association</li><li>Go to → Question 6</li></ul>	Group or organisation recognised under the Associations Incorporation Act 1981.

Note: A family trust is not a legal entity for owning a food business.

### APPLICANT DETAILS (COMPLETE THE RELEVANT SECTION ONLY)

Question 4. Please provide <u>Individual / Sole Trader</u> details below:

NAME OF PERSON (1)	Title	: 🗆 Mr	□ Mrs	☐ Miss	□ Ms	□ Other:	
RESPONSIBLE FOR	Family / Last Name	:					
BUSINESS:	Given / First Name	:					
NAME OF PERSON (2)	Title	: 🗆 Mr	□ Mrs	☐ Miss	□ Ms	□ Other:	
RESPONSIBLE FOR	Family / Last Name	:					
BUSINESS:	Given / First Name	:					
	Line 1:						
POSTAL ADDRESS*:	Line 2:						
	Suburb/Town:					ate and estcode:	
ABN:					11	digits for ABN	
LOT ON PLAN NO.			•		If in	ı Isaac Regional (	Council area.
	Go to → Questi	on 7					

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<sup>\*</sup> A PO Box is not a valid postal address for the serving of legal notices and documents such as licenses.



#### Question 5. Please provide the Corporation details below:

NAME OF CORPORATION:									
NAMES OF ALL									
DIRECTORS:									
REGISTERED OFFICE	Line 1	l:							
ADDRESS*:	Line 2	2:							
CORPORATIONS ACT 2001	Subui	r <b>b/T</b> o	wn:					State and Postcode:	
ABN/ACN:								(9 digits for AC	N, 11 digits for ABN)
LOT ON PLAN NO.	·	•						If in Isaac Region	onal Council area.
	Go to	) <b>→</b> (	Questi	on 7	7				

#### Question 6. Please provide Incorporated Association details below:

NAME OF INCORPORATED ASSOCIATION:  I am a non-profit organisation preparing meals from a particul place on more than 12 days per financial year. (tick if applicable)					meals from a particular nore than 12 days pers						
NAMES OF MANAGEMENT COMMITTEE MEMBERS:											
REGISTERED OFFICE ADDRESS*:	_	e 1: e 2:					<u>'</u>				
ASSOCATIONS INCOPORATION ACT 1981		burb	/Tow	n:				State and Postcode:			
IA/ABN:									(5 digits for IA, 11 digits for ABN)		
LOT ON PLAN NO.									If in Isaac Regional Council area.		

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<sup>\*</sup> A PO Box is not a valid postal address for the serving of legal notices and documents such as licenses. Please provide a complete list of all directors. Any changes to this list must be advised to Council.

<sup>\*</sup> A PO Box is not a valid postal address for the serving of legal notices and documents such as licenses. Please provide a complete list of all management committee members. Any changes to this list must be advised to Council.



### PRIMARY CONTACT PERSON'S DETAILS (APPLICATION AND LICENSING PURPOSES)

Question 7. Please provide details for the primary contact person below:

CONTACT PERSO NAI							
PHONE NUMB	ER:			MOBII	LE / OTHE PHON		
EMAIL ADDRE	SS:						
FOOD BUSINE	ESS	S DETAILS					
Question 8. Plea	se	orovide the foll	lowing inf	ormation:			
NAME OF FO BUSINE							
PREVIOUS TRADI NAI (If applica	ME:			□ N/A		OUS LICENCE NUMBER ble and if known)	FB □ N/A
INTENDED DATE COMMENCEME OF TRA	NT	OR; □ As soo	on as licenc	e issued		HE PREVIOUS LICENCE BE RRENDERED?	☐ Yes ☐ No ☐ N/A or Not sure
			receiving	a licence!			
ADDRESS WHE		Line 1:					
VEHICLE IS TO STORED		Line 2:					1
GARAG	ED:	Suburb/Town:				State and Postcode:	
LOT ON PLAN N	10.:				If unkno	wn, contact Coun	cil for assistance.
Question 9. Wha Business? The r		•					
☐ Same as <b>Appl</b> i	ican	t Details		☐ Same as	Address	s where vehic	le is housed
☐ I would like to I	nom	inate a different	address:	(provide details	s below)		
Line 1:							
Line 2:							
Suburb/Town:				State and	d Postco	de:	
Lot on Plan No.						(if in Isaad	c Regional Council area)

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#### PREMISES DETAILS

Question 10. The operation will be conducted from a: (please tick one)

□ Mobile Van	provide registration no.)	☐ Mobile Trailer (provide registration no.)
□ Other*	Description of Premises:	
(please specify)	Unique Identifier (serial no. or similar)	

#### Question 11. The Food Business will be: (please tick one)

☐ Using an existing mobile premises.	Plans <u>not required if evidence of suitability</u> of premises can be provided, otherwise <u>requires you to submit an application for plan assessment.</u>
☐ Fitting-out or altering an existing mobile premises.	Ensure that your new plans are compliant with the FS AS/NZ Standard 3.2.3.  Requires you to submit an application for plan assessment.
☐ Constructing or fitting out a new mobile premises.	Ensure that your plans are compliant with the FS AS/NZ Standard 3.2.3.  Requires you to submit an application for plan assessment.

Note: It is recommended that plan assessment application is submitted prior to the food business licence application to ensure adequate time for construction and/or fit out activities - unless intended to be complete and operational within thirty (30) days.

#### **FOOD SECTOR / ACTIVITIES**

The following activities are non-licensable if they are your only activities:

- Sale of coffee, tea, and/or bottled drinks;
- Sale of pre-packaged foods (made and packaged by licenced food businesses).
- Sale of pre-made cakes and biscuits that do not require refrigeration (made by licenced food business).
- Sale of unpackaged snack foods such as potato/corn chips, nuts, confectionary, etc. (sourced from licenced food businesses).

Note: Vehicles used for the transport and delivery of food do not require licence unless the food is being handled in the vehicle.

The following activities require a licence (11A, 11B, 11C, and 11D):

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Question 12A. Which of the following apply to	your business? (select all that apply) Low Risk
☐ Breakfasts with non-potentially hazardous foods Including cereal, toast, pastries, bread, jams and spreads.	☐ Making low risk shelf-stable bread and cakes, biscuits, etc.  Making only low-risk ready-to-eat foods with no potentially hazardous toppings or fillings (e.g. dairy, custard)
☐ Other low risk activity:  Please specify	
Question 12B. Which of the following apply to	your business? (select all that apply) Minor Prep
☐ Fruit and vegetable juicing/processing Making fruit and vegetables juices, smoothies, beverages etc, at point of sale.	☐ Fruit and vegetable cutting Cutting, slicing, dicing, and/or packaging fresh fruit and vegetables for sale at that location.
Pre-made, unpackaged ready-to-eat foods such as pies and sausage rolls Pre-made foods which are unpackaged and ready-to-eat and are potentially hazardous, such as pies and sausage rolls. These items must be made and supplied by a licensed premise.	☐ Sale of cakes, biscuits, muffins, slices, etc. with potentially hazardous toppings.  When made by a licensed manufactured.
☐ Sale of pre-made ice-cream  Serving of ice-cream which has been supplied by a licensed manufacturer.	
☐ Other low risk minor prep activity:  Please specify	
Question 12C. Which of the following apply to	your business? (select all that apply) Medium Risk
☐ Take-away serving potentially hazardous foods  Ready to eat foods such as salads, fish and chips, rice or pasta dishes, burgers, sandwiches, and other cooked meals.	☐ Baking and producing potentially hazardous food Including foods such as meat pies, sausage rolls, slices, tarts, and cakes with potentially hazardous fillings such as dairy, custard, egg etc.
☐ Sale of unpackaged food by retail Including delicatessens and supermarkets processing potentially hazardous foods such as sliced hams.	☐ Ice-cream processing Includes processing, dispensing, producing, manufacturing, and packaging of ice-cream products
☐ Other medium risk activity:  Please specify	

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Question 12D. Which of the following apply to your business? (select all that apply) High Risk

☐ <b>Offsite Catering</b> Serving potentially hazardous food at a place other than the principle place of business. Does not include merely delivering food.	
☐ Other high-risk activity  Please specify	

#### IF YOU CONDUCT A FOOD SAFETY PROGRAM ACTIVITY, YOU MUST SUBMIT:

- 1. An Application for Accreditation or Amendment of a Food Safety Program form to be attached to this application.
- 2. Written Auditors Advice from an auditor to be attached to this application.
- 3. The **Food Safety Program** to be attached to this application.

Food Business Licence Applications for activities that require Food Safety Programs cannot be approved without the accreditation of the Food Safety Program.

The Food Safety Program must be accredited by council for the licence to be approved.

Question 13. Please provide details regarding the activities and processes to be carried out:

1	3.1 Types of food and meals to
D	e prepared:
Р	ease attach a menu if you have one
	·
pr	repared.
1:	3.2 What type of food-grade
S	anitiser will be used to sanitise
٤,	ood contact surfaces?
10	ou contact surfaces?
Р	ease provide the product name

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13.3 Do you have a probe thermometer to regularly check the temperatures of potentially hazardous foods?	□ YES □ NO Foods:  OR □ There will be no potentially hazardous food handled.  The probe must be a capable of measuring temperature accurately to ± 1°C. A digital probe thermometer will achieve this. You are also required to sanitise the probe before each use.  Examples of when to check the temperature of food with a probe thermometer:  When food is received from supplier Regularly checking the temperature of food stored in the refrigerator When food is on display for retail or self-service in bain-marie, hot box, or display case To monitor temperatures when cooling foods When cooking and reheating foods  uire preparation/cleaning by immersion in water, such as				
raw/uncooked fruits or vegetable					
Please explain where they will be washed: e.g. dedicated prep sink					
13.5 Will you be doing any	☐ YES ☐ NO  Use of deep fryers trigger ventilation – exhaust hood requirements under the Building Code of Australia, AS/NZ Standard 1668.1 and 1668.2.				
deep frying?	Use of deep fryers trigger ventilation – exhaust hood requirements under the Building Code of Australia, AS/NZ Standard 1668.1 and 1668.2.				
deep frying?					
13.6 What types of cooking equipment will you be intending to use?					

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13.7 Are the walls in the mobile premises smooth and impervious?	Walls must be made	crevices, dents, bum	□ <b>N</b> oterial. They must be free of ps, and grooves.  e limited or fit-out/alterat	of gaps, cracks,
13.8 Are the floors in the mobile premises smooth and impervious?	☐ YES ☐ NO  Floors must be made of non-absorbent material. They must be free of gaps, crac crevices, dents, bumps, grooves, and not allow ponding of water – non-slip stain steel is acceptable.  If you answered NO, your activities may be limited or fit-out/alterations require			of gaps, cracks, non-slip stainless
13.9 Is the ceiling in the mobile premises smooth and impervious?	Ceilings must be r	racks, crevices, dents, b	material. They must be bumps, and grooves. e limited or fit-out/alterat	free of gaps,
13.10 What waste-water disposal facilities are available for use at the premises?	☐ A secure disposal tank or container of adequate capacity.  Other:			
13.11 How will waste-water be disposed of from the holding tanks?		roved trade waste facility the approved trade	acility. de waste facility below	v:

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13.12 What is your process for the cleaning and sanitising of food contact utensils and equipment? (please select one)	<ul> <li>□ All equipment and utensils will be washed in a single bowl sink and then sanitised in a dishwasher and/or glasswasher Require a single bowl for rinsing, and dishwasher for sanitising with heat or chemical.</li> <li>□ Some equipment will be washed and sanitised in a double bowl sink; and Some equipment will be washed in a single sink and sanitised in a dishwasher or glasswasher.         <ul> <li>One bowl for washing, the other for sanitising and dishwasher for sanitising.</li> <li>□ A double bowl sink only</li> <li>Must be able to fit largest piece of equipment in the sink.</li> <li>One bowl for washing, the other for sanitising.</li> </ul> </li> <li>□ A triple bowl sink only</li> <li>Wash, rinse, sanitise procedure; or</li> </ul>
	Wash, rinse, sanitise procedure; or  Wash, rinse/sanitise, rinse procedure.
	wash, misersamuse, mise procedure.
	□ Other:
	El Mathad A.
13.13 Which handwashing method will you be using?	<ul> <li>☐ Method 1: <ol> <li>In warm running water using soap</li> <li>Dried with a paper towel</li> <li>Using a basin that is designated for the sole purpose of washing hands, arms, and face only.</li> <li>Using a designated hand-wash basin that is within 5 meters of all food handling activities</li> </ol> </li> <li>☐ Other Method (please describe):</li> </ul>
13.14 Where will waste, garbage, and recyclable matter be stored? (select all which apply)	<ul> <li>□ In a bin with a secure, tight fitting lid</li> <li>□ Will be regularly emptied</li> <li>□ Liquid Waste (e.g. oil, waste water) protected from spillage e.g. undercover area with a bund wall, etc.</li> </ul>
	Other:

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### SUITABILITY OF PERSON(S) TO HOLD A LICENCE

Question 14. What fo will be undertaken by	_	_		taken l	by food hand	dling staff, and
Note: Please attach any You may consider hav http://isaac.imalert.com.au, online Food Safety Train	ring food handlers or alternativly visit	complete	the free c	nline t	raining <b>I'M A</b>	ALERT available at
Question 15. Have yo Obligation? All staff	•	-		_		
□ YES			□ NO			
Please attach a copy of used, and keep all sign			You Food	Busin	ess documen	e 4 from the <b>Know</b> at. Please contact o speak to an EHO.
Question 16. Please   You must provide details  ☐ I will nominate a		y Supervis	sor within thirt	y (30) d	lays of receivir	ng your licence.
☐ I would like to n	ominate a Food Sa	ety Super	visor now: <i>(pl</i>	ease prov	vide details below	·)
NAME OF FOOD	Title:	□ Mr □	Mrs   Miss	□ Ms	□ Other:	
SAFETY	Family / Last Name:					
SUPERVISOR:	Given / First Name:					
MAIN CONTACT PHONE NO.:						
MOBILE NUMBER:						
EMAIL ADDRESS:						
EXPERIENCE OR QUALIFICATION:						
Note: Any changes to Fo You may nominate more						

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application.



- A Food Safety Supervisor must be reasonably available upon request.
- A food business must have a Food Safety Supervisor at all times, failure to have a Food Safety Supervisor at all times carries a maximum penalty of 50 units.

### Question 17. Please read the below statements carefully:

Statement 1.	Do any of the applicants (or an eofficer of the corporation, or a mer association's management commiconviction for a breach of food other than a spent conviction*?	nber of the ttee) <b>have a</b>	☐ YES (please provide details below)	□ NO		
If you answered YES, please provide details of the offence and the circumstances of its						
commission:	the chountstances of its					
Statement 2.	Have any of the applicants (or a officer of the corporation, or a mer association's management commi ever had a food licence suspend cancelled?	nber of the ttee)	□ YES	□ NO		
Statement 3. Have any of the applicants (or an executive officer of the corporation, or a member of the association's management committee) ever been refused a food licence under this Act or the Food Act 1981 or a corresponding law?		nber of the ttee) <b>e under</b>	□ YES	□ NO		
* A spent conviction is a criminal conviction that has lapsed after a period of time and has been removed fron a person's criminal record.						
APPLICANT CHECKLIST						
☐ I have <b>answered all questions.</b> Please contact Isaac Regional Council if you require assistance.						
I have attached the following documentation:  ☐ Evidence of training / qualifications ☐ Health and Hygiene Obligations template						
Where a food safety program is required:  ☐ I have attached my Food Safety Program along with the accreditation application form and auditors written advice.  OR ☐ N/A						
☐ I have paid / will supply payment details on the credit card payment form.						

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#### **DECLARATION**

- If the application is made by a corporation or incorporated association, the person signing is legally entitled to make the application on behalf of the corporation or incorporated association.
- I understand that all information supplied on or with this application form may be disclosed publicly in accordance with the Right to Information Act 2009 and the Evidence Act 1977;
- I understand that legal action may be taken against me under the relevant Acts and Regulations if the information provided is known to me to be false or misleading at the time of supplying the information.

APPLICANT'S SIGNATURE:	DATE:	/ /
PRINT NAME:		

records@isaac.qld.gov.au OR;

Once completed please send form, payment, and any attachments to **ONE** of the following:

**Isaac Regional Council** 

PO Box 97 Moranbah QLD 4744 OR;

Deliver and pay in person to your local Isaac Regional Council Office.

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