

# **Food Premises Registration**

## Food Act 2003 and Local Government Act 1993

OFFICE USE ONLY						
Reference No.						
About this for	m					
	egister your retail fo or or a change of to		ayside Council. A new fo	orm must be submitted if there	e has been	
Proposal						
<ul><li>☐ New Business</li><li>Applicant deta</li></ul>	_	r □ Change of Tr en one 1 proprietor, plea		details in the Additional Information s	section)	
Title:	□ Mr	□ Mrs	□ Ms	☐ Other		
First Name:			Family Name:			
Trading Name (if a	applicable):					
Company Name (i	f applicable):					
ABN/ACN (if applied	cable):					
Address:						
Suburb:			State:	Post Code:		
Email Address:						
Daytime Telephon	e No. (Home/Work	):	Mobile No:			
Business trad Business/Trading	ing name prem	ises details				
ABN/ACN						
Store/Duty Manag	er:					
Address:						
Suburb:			State:	Post Code:		
Email Address:						
Daytime Telephon	e No. (Home/Work	):	Mobile No:			
Mailing address						
Is your mailing add	dress different from	your street address	s?	□ No □ Yes – <i>compl</i>	ete below	
Mailing Address:						
Suburb:			State:	Post Code:		
CM reference: 23/170040	Last updated: 01/07/023	3			1/3	
Postal address PO Box 21, Rockdale NS ABN 80 690 785 443	SW 2216 Rockdale	e Customer Service Cen e Library, 444-446 Princes I lens Library, Westfield East		W www.bayside T 1300 581 299 Eastgardens	e.nsw.gov.au	

Теlephone Interpreter Services: 131 450 Τηλεφωνικές Υπηρεσίες Διερμηνέων 電話傳譯服務處 Служба за преведување по телефон

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Type of Food Premises							
☐ Restaurant	□ Cafe			Take av	vay food		
☐ Supermarket	☐ General store			Service	station		
☐ Bakery	☐ Chicken/poultry re	tail		Child ca	re centre		
☐ Canteen/kiosk	☐ Delicatessen		☐ Food caterer				
☐ Ice-cream shop	☐ Licenced club/rest	☐ Seafood - retail					
☐ Other (please specify):							
Operating/Business Hours							
☐ Day-time operation	☐ Day and night-time	e operation	□ 1	Night-tir	ne only ope	eration	
Development Consent or Comp Development Application (DA) Number:	lying Developme	nt Certificate		<b>ls (wh</b> Date Iss		icable)	
<b>Details of Food Safety Supervis</b>	sor						
First Name:		Family Name:					
Certificate number:							
Certificate issue date:	Ce	ertificate expiry da	ate:				
Email Address:		Timouto onpiry at	ato.				
		Mahila Na					
Daytime Telephone No. (Home/Work):		Mobile No:					
<b>Supporting Documentation</b>							
Mandatory Documents				Applicant Use Office Use			Use
			Yes	No	Exempt	Yes	No
1. Food Safety Supervisor (FSS) Certification	ate (unless exempt)						
Additional Information							
Fees					Applica		de
Food Premises Registration Fee			\$65.00		RC/150	50	
Declaration							
I declare that I am the applicant (or have authorisation to act on behalf of the applicant) and that all the information in this application is true and correct.  Council may inspect the business without prior notice to assess the business for compliance with legislative requirements. An inspection fee may be charged. To view the Food Standards Australia and New Zealand (FSANZ) Food Safety Standards, please refer to the FSANZ website: <a href="http://www.foodstandards.gov.au">http://www.foodstandards.gov.au</a>						n	
Applicant's Signature				ate	1	1	

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#### **Further Information**

For further information contact Council's Environmental Health Team on 1300 581 299 Monday to Friday between 8.30am and 5pm; or visit one of Council's Customer Service Centres at Eastgardens and Rockdale; or visit Council's website at www.bayside.nsw.gov.au.

Further information on food safety requirements and standards can also be obtained from the following websites: <a href="http://www.foodstandards.gov.au">http://www.foodstandards.gov.au</a> and <a href="http://www.foodstandards.gov.au">http:/

## How to lodge this application

You can lodge your completed application form and any required supporting documents:

#### **Online**

Do not complete this form. Instead visit www.bayside.nsw.gov.au and search for "Food Premises Registration" and complete our online form and make payment online.

#### In person

At any of Council's Customer Service Centres:

- Rockdale Customer Service Centre: 444-446 Princes Highway, Rockdale NSW 2216
- Eastgardens Customer Service Centre: Westfield Eastgardens, 152 Bunnerong Road, Eastgardens NSW 2036

#### By mail

Post to Bayside Council: PO Box 21, Rockdale NSW 2216 with payment via cheque or money order (do not send cash)

Payment is preferred by cheque, money order, debit or credit cards (Visa and Mastercard). Payments made using a credit card will incur a service fee of 0.5%

# **Privacy notification**

Completion of this document is voluntary - partially completed applications may result in refusal of the application. The personal information provided on this form (including your name and other details) will be handled in accordance with the Privacy and Personal Information Act 1998 and may be available to the public under various legislation

OFFICE USE ONLY		
Receipt No	Date	\$

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