Application to Register a Food Premises

Food Act 1984



Information for Food Businesses – Food Act Registration or Notification

The Food Act 1984 (the Act) regulates the sale of food for human consumption. From 1 July 2010 a new food premises classification system applies to all food premises operating in Victoria.

If your business sells food you must either register with, or notify, the council in which the premises is located. This information sheet explains whether you will need to **register** or **notify.**

Please note: You must attach this page to your application or notification to register, renew or transfer a food premises forms.

Food Act Application for Registration or Notification

There are now four classes of food premises – class 1, class 2, class 3 and class 4. The new classification system means that regulatory requirements are better matched to the level of food safety risk associated with the food handling activities at different types of premises. Class 1 has the highest and class 4 the lowest level of legal requirements. In summary, the new classes are:

- Class 1 hospitals, child care centres and aged care services which serve high risk food.
- Class 2 other premises that handle high risk food unpackaged food.
- Class 3 premises that handle unpackaged low risk food or high risk pre-packaged food, and warehouses and distributors.
- Class 4 as described below.

Classes 1, 2 and 3 premises must register with the council Class 4 premises must notify the council.

You will be a class 4 premises and only need to notify if your only food handling activities are as follows:

- The sale of shelf stable pre-packaged low risk food such as confectionery, crisps, frozen ice cream, milk, bottled drinks for example, newsagents, pharmacies, video stores and some milk bars.
- The sale of packaged alcohol for example, bottle shops.
- The sale of uncut fruit and vegetables for example, farmers markets, green grocers and wholesalers.
- Wine tasting (which can include serving low risk food or cheese).
- The sale of packaged cakes (excluding cream cakes).
- The supply of low risk food, including cut fruit, at sessional kindergarten or child care.
- Simple sausage sizzles at stalls, where the sausages are cooked and served immediately. This means sausages, sauce, onions and bread. (This does not include hamburgers or other high risk foods).

For a full list of class 4 activities go to http://www.health.vic.gov.au/foodsafety

Please mark one of the following:

1.	☐ The only food handling activities at my premises are as described above.
Ple	ease complete a notification of a food premises form and submit to council for confirmation.
2.	☐ The food handling activities carried out at my food premises involve other activities that are not listed above.

If you marked box 2, you may be required to register with the council.

Please contact the council to discuss:

- the process for registering your premises using the application to register a food premises form; and
- when your premises is a class 1, 2 or 3. This will decide whether you require a food safety program and/or a food safety supervisor.

If you operate a supported residential service you will need to inform the council whether the majority of your residents are aged persons.

Council will ask if you handle or intent to handle high risk foods. This means foods that require temperature control (refrigeration or heating). For example meats, chickens, fish smallgoods, custard, cream, salads, cooked pasta, eggs and sandwiches.

The attached notification of a food premises form may not be used by your council for community group events. Please contact your council to obtain the appropriate form.



Application to Register a Food Premises Food Act 1984

Council	Jse Only
Application Date :-	
Document ID:-	
Application Number:-	
Date of registration:	

Please read the pre-application information section at the beginning of this form. If your premises is listed as a class 4, please complete a notification form instead of this registration form. IMPORTANT -

		Proprietor Details	S
Title	Surname	Given Name(s	s)
	tor is a company or association	on, specify name of person completing the a	application and authority (eg. Director of Company)
Authority			
	or of company		
Business N	ame	Comp	pany Name (if applicable)
01 1 4 1 1	/D ()		
Street Addr	ress / Postal address		
Suburb / To	nwn	State	Postcode
Oubuib / To	74411	State	1 CSTOOGC
Please prov	vide at least one phone nu	mber and include the area code	
Business P		phone Business	s Fax Mobile
Dusiness i	Hone Home	priorie Business	Woolic
Email			
Liliali			
Trading nan	ne of Premises	Premises Details	s
Premises		Premises Details	s
Premises Street addre			
Premises		Premises Details State	Postcode
Premises Street addre	ess 	State	
Premises Street addre	ess erson at premises (if not	State t the proprietor)	Postcode
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Premises Street addre	ess erson at premises (if not Surname	State the proprietor) Given Name(s	Postcode
Premises Street addre Suburb Contact pe Title Please prov	erson at premises (if not Surname	State t the proprietor) Given Name(s	Postcode
Premises Street addre	erson at premises (if not Surname	State t the proprietor) Given Name(s	Postcode
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Premises Street addre Suburb Contact pe Title Please prov Business Pl	erson at premises (if not Surname	State t the proprietor) Given Name(s	Postcode
Premises Street addre Suburb Contact pe Title Please prov Business Pl	erson at premises (if not Surname vide at least one phone numbers)	State t the proprietor) Given Name(s	Postcode
Premises Street addre Suburb Contact pe Title Please prov Business Pl Email	erson at premises (if not Surname vide at least one phone numbers)	State t the proprietor) Given Name(s	Postcode

	Premises De	etails cont.		
Q1.	Does the Premises have sit in Dining?	□ Yes	□ No	
Q2.	Will you be providing Catering?	□ Yes	□ No	
Q3.	Will you be delivering food to private residences/other premise	es?	□ No	
	If YES, please provide details of delivery vehicle			
	Food vehicle details (if applicable) Registration Number Make	Model		
ſ	At what address is the vehicle garaged when not in use? Street address			
Ĺ	Suburb State	Postcode		
	Suburb	Fosicode		
L				
	Communit	y group		
	A community group is a not for profit organisation or a person(s) uraising funds for charitable purposes or for a not for profit organisation.	indertaking a food handling activity so	olely for the pur	pose of
	Are you a community group that sells food up to two consecutive of food handlers are volunteers? If NO, go to section: Food related details	days at a time and most □ Yes	□ No	
	If YES, are you selling ready to eat high risk food? If NO, you are classified as a class 3. Go to section: Classification.	☐ Yes ation	□ No	
	 If YES, is all of the high risk food cooked on site with the intention If YES, you are classified as a class 3. Go to section: Classified If NO, you are a class 2, however you are exempt from the forequirements. Go to section: Classification 	cation.	□ No	
	Food relate	d details		
	This section is to be completed in discussion with the local counci - class 1, 2 or 3	I. The answers will determine the clas	ssification of yo	our food premises
	Q1. Are you a wholesaler / distributor of pre-packaged food?		☐ Yes	□No
	If YES, is this the only food handling activity at your prem If YES, you are classified as a class 3. Go to section: 0 If NO, proceed to question 2		□ Yes	□ No
	Q2. Is the food prepared or served exclusively for people or phospital, or meals on wheels service? If YES, you are classified as a class 1. Go to section: Classified If NO, proceed to question 3	-	□ Yes	□ No
	Q3. Is the food prepared or served exclusively for children at If NO, proceed to question 4.	a childcare centre?	☐ Yes	□ No
	If YES, is the food high risk? If YES, you are classified as a class 1. Go to section: 0 If NO, proceed to question 5.	Classification	□ Yes	□ No

Food related details cont.		
Q4. Are you a greengrocer that only sells fruit, vegetables &/or packaged food?	☐ Yes	□ No
If NO, proceed to question 5.		
If YES, do you prepare fruit salad, fruit juice or salads?	☐ Yes	□ No
If YES, you are classified as a class 2. Go to section: Classification		
If NO, do you cut/slice fruits and vegetables?	☐ Yes	□ No
If YES, you are classified as a class 3. Go to section: Classification		
If NO, you do not require Food Act registration. You only need to complete the notification	ition form.	
If none of the above applies to your premises, the classification of your premises will depend upon the ris your food handling activities such as refrigeration and cooking. Please answer the following questions to in determining whether your premises is a class 2 or 3. Q5. Do you handle any food that does not require refrigeration?		
Is any of the food pre-packaged?	□ Yes	□ No
Is any of the food being prepared/made and sold directly to the public?	□ Yes	□ No
Q4. Are you a greengrocer that only sells fruit, vegetables &/or packaged food? If NO, proceed to question 5. If YES, do you prepare fruit salad, fruit juice or salads? If YES, you are classified as a class 2. Go to section: Classification If NO, do you cut/slice fruits and vegetables? If YES, you are classified as a class 3. Go to section: Classification If NO, you do not require Food Act registration. You only need to complete the If none of the above applies to your premises, the classification of your premises will depend upo your food handling activities such as refrigeration and cooking. Please answer the following ques in determining whether your premises is a class 2 or 3. Q5. Do you handle any food that does not require refrigeration? Is any of the food pre-packaged? Is any of the food being prepared/made and sold directly to the public? Is any of the food being manufactured on the premises to be sold to retail shops/wholesale/distributor? Is any of the food being re-packaged? Q6. Do you refrigerate, cook and/or reheat food? Is any of the food pre-packaged? Is any of the food being prepared and sold directly to the public? Is any of the food being manufactured and sold to retail shops/wholesale/distributor? Is any of the food being manufactured and sold to retail shops/wholesale/distributor? Classification Following discussion with the Council about your food handling activities, select your food premises of your Council: Food Premises Classification Class 1		
shops/wholesale/distributor?	☐ Yes	□ No
Is any of the food being re-packaged?	☐ Yes	□ No
Q6. Do you refrigerate, cook and/or reheat food?	☐ Yes	□ No
Is any of the food pre-packaged?	☐ Yes	□ No
Is any of the food unpackaged?	☐ Yes	□ No
Is any of the food being prepared and sold directly to the public?	☐ Yes	□ No
Is any of the food being manufactured and sold to retail shops/wholesale/distributor?	☐ Yes	□ No
Classification		
Following discussion with the Council about your food handling activities, select your food premises classification your Council:	ation below a	s advised by
Classification selection is necessary so that you can complete the remainder of this application form	-	
For further information, refer to the Food Classification Tool at www.foodsmart.vic.gov.au/foodcl	ass/	

	Food Safety Program					
Clas	ss 1 and 2 food premises only.					
	must complete either question (1) Standard Food Safety Progending on the type of program used at your premises	ram or qu	estion (2) Non Sta	andard F	ood Safe	ety Program,
Q1.	Do you have a Standard Food Safety Program?			☐ Yes	□ No	
	If NO Proceed to question Q2					
	If YES please select the type of FSP and proceed to section: Foo	d safety รเ	ıpervisor			
	□ Food Safety Program Template for Class 2 Retail & Food Se	ervice Busi	nesses No. 1. Vers	ion 2		
	□ Food Smart (Online)					
	□ Other FSP template registered by the Secretary of Departme	ent Health				
r	Name of program	Regist	ered number of te	mplate		1
Q2.	Do you have a Non Standard Food Safety Program (Independ	ent FSP)?	•	□ Yes	□ No	
	Has the premises been audited by an approved food safety audito			□ Yes	□ No	
	If the answer is NO, specify when the premises is to be audited Date of Audit Name	e of food	safety program			
Has	lared QA Food Safety Program the FSP been prepared under a QA system or code declared	under the	Food Act?	□ Yes	□ No	
	ES complete the following details:					
	Specify the declared QA system or code:					
	Audit certificate attached	□ Yes	□ No			
	If YES, attach the certificate from the food safety auditor confirmir prepared under and conforms with that QA system or code.	ng that the	program has been			
	If NO, specify the date when the audit is to be undertaken					
	s the FSP include competency based or accredited training fonises? If YES you are exempt from the food safety supervisor requiremen		he	□ Yes	□No	

Required documents

There are no attachments if you have a template standard food safety program

- U Class 1 Premises copy of the non-standard / independent food safety program Only (1) Copy
- ① Class 1 Premises A current certificate from an approved food safety auditor indicating that the FSP is adequate only if applicable. Only (1) Copy
- U Class 2 Premises A current certificate from an approved food safety auditor stating that the FSP meets the requirements of the Act only if available. Only (1) Copy
- ① Class 2 Premises if you have not attached the current certificate from an approved auditor attach a copy of the non-standard / independent food safety program. (Do not attach QA Systems)
- U Class 1 and 2 Premises copy of evidence of required qualifications for the nominated Food Safety Supervisor

		Food safety sup	pervisor	
Clas	ss 1 and 2 food premises only.			
	- has a declared QA food safety p	upervisor is not required if the for rogram that includes competency be mpt as described on page 2 of this	pased or accredited training for sta	aff of the premises; or
	Street Address / Postal address			
	Suburb / Town		State Postcode	
	Please provide at least one phone Business Phone Hon			<i>N</i> obile
	Email			
	Please attached copy of evider	nce of required qualifications for	the nominated Food Safety Su	pervisor
		Other deta	ils	
Q4.	Cigarettes sold from premises? If NO Proceed to question Q3 If YES, please provide details:		□ Yes	□ No
	☐ Vending Machine Only	☐ Over the Counter Only	y □ Both	
Q5.	License to Sell Liquor? If YES, please provide details:		□Yes	□ No
	☐ BYO Licence	☐ Limited Liquor Licence		
	☐ Club Licence	☐ On Premises Liquor Licence	ce	
	☐ General Liquor Licence	☐ Packaged Liquor Licence		
	□ Other:			

Payment Details

Please contact Moyne Shire Council's Environmental Health Officer on 03 5568 0555 to confirm appropriate fee and arrange payment.

Declaration				
Class 1, 2 & 3 food premises				
I understand and acknowledge that: - The information provided in this application is true and complete to the - This application is a legal document and penalties exist for providing fa				
Class 3 food premises only In addition to the above and by ticking this box, I acknowledge the under the Food act for the premises will be kept.	at I will ensure that the appropriate minimum records required			
If the business is owned by a sole trader or a partnership, the proprietor(s) must sign and print name(s). If the business is owned by a company or association - the applicant on behalf of that body must sign and print their name.				
Applicants Signature	Applicants Signature			
Print applicant name	Print applicant name			
Date	Date			

Privacy Statement

The personal information on this form is required by Council for Application for Registration of a Food Premises under the Food Act 1984. We will only use your personal information for this and related purposes. If this information is not provided, we may not be able to deal with this matter. You may access and/or amend your personal information at any time.

Ladge the completed and signed form and all decuments w	iida.	
Lodge the completed and signed form and all documents w	iun:	
Moyne Shire Council	Telephone: 03 5568 0555	
PO Box 51		
PORT FAIRY VIC 3284	Fax: 03 5568 2515	
Email: moyne@moyne.vic.gov.au	Website: www.moyne.vic.gov.au	

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