


<b>FOOD BUSINESS NOTIFICATION FORM FOOD ACT 2001</b>	<b>Clare &amp; Gilbert Valleys Council</b> 4 Gleeson Street Clare SA 5453 Phone: 08 8842 6400 Email: <a href="mailto:development@CGVC.sa.gov.au">development@CGVC.sa.gov.au</a>			 <b>CLARE &amp; GILBERT VALLEYS COUNCIL</b>
<b>NOTIFICATION TYPE</b>		New business		Existing business (Change of details)
<b>PART 1 FOOD BUSINESS OWNERSHIP DETAILS</b>				
Name of proprietor (Mandatory entry)				
Note: If ownership is a partnership, provide the names of all partners				
ACN number (if applicable)				
Note: The Australian Company Number (ACN) applies to Companies registered with the Australian Securities and Investments Commission (ASIC). The ACN is mandatory if your business is a company. A company can be a Proprietary Limited (Pty Ltd) Unlimited Proprietary (Pty) Limited (Ltd) or No Liability (NL)				
Mailing address (Mandatory entry)	Line 1			
	Line 2			
	Suburb/ Town		Postcode	
Note: All written communications with the proprietor of a food business will be sent to this address.				
Contact details (Mandatory entry)	Business telepho ne			
Note: All written communications with the proprietor of a food business will be sent to this address.				
Mobile number				
Fax				
Email				
<b>PART 2 BUSINESS LOCATION INFORMATION</b>				
ABN number				
Note: Optional entry if the business is not required to have an ABN. All businesses with an annual turnover of \$50 000 or non-profit organisations with an annual turnover of \$100 000 require an				

ABN. Organisations with a lower annual turnover may choose to register for an ABN. Contact the Australian Taxation office for information on applying for an ABN. Phone 13 28 61.

Registered business name

Note: This is a mandatory entry if you trade other than under your own personal name. If the food business has been registered under the National Corporations Act 2001 administered by the Australian Securities & Investments Commission (ASIC), then the registered company name should be entered here. If the food business has been registered under state or territory legislation and not under the National Corporations Act 2001, then that registered business name should be entered here. If you are unsure if you are legally required to have a registered business name contact the Office of Consumer and Business Affairs on (08) 8204 9779

Trading name of business

This is required if the business does not have a registered business name. If a business name is not registered, indicate the name under which the business is known or operates.

Address type  
(tick one box only)

Street address for the business premises location

Where a mobile food vending business is permanently stationed

Where the mobile food vending/transport vehicle is normally garaged

Note: A street address indicates a business such as a retail shop, factory, food transport depot or similar permanent premises. Two options are provided for mobile food vending / transport vehicles. For mobile vehicles stationed at a permanent location such as a pie cart operating from a leased site select the second option. A business operating a mobile vehicle such as an ice-cream van or a food transport vehicle delivering food would tick the third option to show the address where the vehicle is normally garaged.

Business trading address  
Street (not PO Box)

Line 1

Line 2

Suburb

Post code

Note: The address information in this section relates to information about the business location. This may be different to the business owner address information

**Business information**

Number of employees  
handling food

Number of full time equivalent employees handling food (Mandatory entry)	
Example: Two full time employees plus three employees working half time would equal 3.5 full time equivalent employees. Only include those employees handling food.	
Date business commenced (Mandatory entry)	
Business description Note: Please provide a short description of the business and its operations.	

### PART 3 FOOD BUSINESS SECTOR INFORMATION

Note: The following food business sector questions are mandatory. Businesses will be categorised under three sectors - manufacturing, retail & food service and distribution. It is possible for a business to select more than one sector. For example a large bakery manufacturing products primarily for wholesale may also have a retail outlet on the same site. In this case both the manufacturing sector and retail and food service sector would be selected. Alternatively a bakery predominately operating as a retailer should tick the retail and food service sector not the manufacturing sector.

Business sector	Please tick one or more of the appropriate box(s) below to indicate the sector or sectors in which your business operates:
	<input type="checkbox"/> Manufacturing sector (go to page 4&5)
	<input type="checkbox"/> Retail and food service sector (go to page 5&6)
	<input type="checkbox"/> Distribution sector (go to page 6&7)

#### MANUFACTURING SECTOR

This food sector is subdivided into broad categories based on the type of food produced. There is an option for OTHER to cover a food type that does not fit into one of the defined food categories. A food business may choose more than one category of food.

**Low risk food** is a food that is unlikely to contain pathogenic (potentially harmful) microorganisms and will not normally support their growth due to food characteristics. Examples are grains and cereals, bread, carbonated beverages, sugar-based confectionery, alcohol and fats and oils.

**A pathogen reduction step** is a processing step that significantly reduces the microbial population present in a food material. Examples are cooking, pasteurisation, canning or fermentation or any other processing step that is capable of significantly reducing the level of pathogenic organism present.

**Uncooked fermented comminuted meat products** are products such as salami and mettwurst that do not include cooking in the process of manufacture.

**Type of food manufacture**

a) Please tick the types of food manufactured by your business (Note: there may be more than one)

	Dairy products		Raw fish, shelfish and seafood
	Raw meat and poultry		Processed fish, shelfish and seafood
	Processed meat and poultry		Soft drinks/ non-alcoholic drinks/ juices
	Cooked and uncooked fermented meat products		Eggs or egg products
	Edible oils and oil products		Sugar and confectionery products (including chocolate) or honey
	Raw fruit and/or vegetables		Infant or baby foods
	Processed fruit and/or vegetables		Alcoholic drinks
	Cereal and flour products		Ice and water including spring water
	Bakery goods, bread, pastries cakes		Raw fish, shellfish and seafood
	<b>Other</b> (including mixed food) Please specify:		

<b>b) Does your business only manufacture low risk foods?</b>		Yes		No
<b>c) Do all foods manufactured by your business have a Pathogen Reduction step?</b>		Yes		No
<b>d) Does your business manufacture uncooked fermented comminuted meat products (salami and similar uncooked meat products)?</b>		Yes		No

**RETAIL AND FOOD SERVICE SECTOR:** The retail and food service sector is based on the type of business description. Within this group is a sub group defined as businesses serving at risk persons. These businesses will be classified as high priority. The category OTHER is also included for businesses not covered in the provided options.

**Low risk food** is a food that is unlikely to contain pathogenic (potentially harmful) micro-organisms and will not normally support their growth due to food characteristics. Examples are grains and

cereals, bread, carbonated beverages, sugar-based confectionery, alcohol and fats and oils. For the retail and food service sector low risk food also includes whole fruit and vegetables.

**A medium risk** food is a food that may contain pathogenic (potentially harmful) micro-organisms but will not normally support their growth due to food characteristics; or food that is unlikely to contain pathogenic micro-organisms due to food type or processing but may support formation of toxins or growth of pathogenic micro-organisms. Examples are cut fruit and vegetables, orange juice, canned meats, pasteurised milk, dairy products, ice cream, peanut butter and milk-based confectionery.

**a) What best describes your business type? (tick only one box that represents the predominant description of the business)**

	Bakery		Delicatessen		Club (including sport club)
	Butcher		Mobile food vending vehicle		Liquor store
	Chemist/pharmacy		Restaurant		Supermarket
	Café		Service Station		Takeaway food business
	Canteen		Snack bar/kiosk		Temporary food business
	Caterer		Guesthouse/bed and breakfast/motel		Farm gate sales
	Child care centre		Hotel/pub/travel		Stall
	Fishmonger/seafood		Mobile food vending vehicle		Charitable/fundraising/ community organisation
	Fruiterer/greengrocer		Function center		Other (Please specify)

**Business serving at risk persons**

	Age care facility/Nursing home		Hospital		
	Home delivered meals to the elderly		Day care/child care		

<b>b) Does your business only sell low risk foods (packaged and unpackaged) or medium risk foods received and sold in the manufacturer's supplier's original sealed packaging?</b>	Yes	No

**DISTRIBUTION BUSINESS**

Food transport includes general carriers that transport food.

**a) What best describes your food business type? TICK ONLY ONE BOX that represents the predominant description of the business**

	Importer		Wholesale distributor/ packer
	Food transport		Warehousing
	Cold storage		<b>Other</b>

If you selected '**other**' please specify below:

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<b>b) Does your business only sell low risk foods (packaged and unpackaged) or medium risk foods received and sold in the manufacturer's supplier's original sealed packaging?</b>	Yes	No

**Vehicles details**

**How many vehicles do you use?**

1. Vehicle type/make		Rego	
2. Vehicle type/make		Rego	
3. Vehicle type/make		Rego	

**PART 4 NOMINATION OF FOOD SAFETY SUPERVISOR**

Standard 3.2.2A - Food Safety Management Tools, requires category one and category two businesses to appoint a certified Food Safety Supervisor (FSS). An FSS must hold a certificate (or Statement of Attainment) issued by an RTO showing the required units of competency were completed within the last 5 years.

Food Safety Supervisor Name:

Address:

Business hours contact no:

**PART 5 DECLARATION AND AUTHORISATION**

I declare, I have read and understand the information contained in this document and the information I have provided is accurate, to the best of my knowledge, at the time of submission. I am aware that incomplete forms will not receive approval.

**Authorisation**

Notification submitted by

Signed

**For official use only**

Notification received by

Date of receipt