

Application for a Food Business Licence – Barlow Park Fixed Premises Commercial – Fixed Premises Non-profit Organisation Food Act 2006

2023/24

Please submit this application at least 30 days prior to your intended event or commencement date of trade to ensure your application is assessed and the premises inspected on time. For your application to be assessed you must:

- Complete all sections fully (unless otherwise stated);
- Enter N/A if the question does not apply, do not leave answers blank;
- Provide all supporting information referred to on this form (if insufficient space please attach); and submit with the relevant fee
- Ensure you have read Fixed Food Business Operation & Construction Guidelines prior to submitting this application.

NB. Incomplete applications may be refused/delayed and late applications may not be assessed by your intended commencement date.

1. What are you applying for?

New Licence Complete all sections	<input type="checkbox"/>	Notification Non-profit Organisation Complete all sections	<input type="checkbox"/>
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2. Which Venue are you applying for?

Barlow Park – Scott St – Upstairs Canteen <input type="checkbox"/>	Barlow Park – Spence St - Canteen <input type="checkbox"/>	West Barlow Park - Canteen <input type="checkbox"/>
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3. Applicant Details

Who is making this application:	Individual/Partnership (if Partnership both names to be provided)	<input type="checkbox"/>		
	Corporation	<input type="checkbox"/>		
	Incorporated Association <u>with</u> poker machines	<input type="checkbox"/>		
	Incorporated Association <u>without</u> poker machines (please provide supporting documentation from ATO)	<input type="checkbox"/>		
	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>
Applicant Name (1): (if Individual or Partnership):	Given Name/s:		Family Name:	
	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>
Applicant Name (2): (if Individual or Partnership)	Given Name/s:		/Family Name:	
Legal Entity Name: (Corporation/Incorporated Association)				
Trust Name: (if applicable) as trustee for				
Business Trading Name:				
ABN: (attach copy of ABN)				
Contact Name:				
Name of all Directors / Management Committee				
Contact Number:				
Contact Email (1):				
Contact Email (2)				
Residential Address:				
Corporation Registered Address:				
Incorporated Association Nominated Address:				
Postal Address:				

4. Event Details

Name of Event	Date of Event	Bump in Time	Time of Event

5. Trading Details

Trading Name:	
List foods intended to be prepared and/or sold, or attach menu:	

6. Origin of food

Will all of the food be prepared at the temporary food premises:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
For individuals or corporation where food is prepared at a premises other than the temporary food premises, please provide details below of licensed premises where food will be prepared of the location. If this premises is outside the Cairns Regional Council area, a copy of the food licence must be provided		
Name of premises:		
Licence number if applicable:		

7. Suitability Details

7A. Suitability of Applicant			
Has the applicant previously held a licence under the <i>Food Act 2006</i> , the <i>Food Act 1981</i> or a corresponding law:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the applicant, including an executive officer of the corporation or member of the association's management committee, ever had a licence refused, suspended or cancelled, or been convicted of a relevant offence, other than a spent conviction, under the <i>Food Act 2006</i> , the <i>Food Act 1981</i> or a corresponding law: (if yes, please provide details as an attachment)		<input type="checkbox"/> Yes	<input type="checkbox"/> No
7B. Food Safety Supervisor / Food Handler for Non-profit Organisation			
All licenced food businesses must have at least one Food Safety Supervisor and for non-profit organisations, a nominated food handler.			
Name:			
Telephone Number:			
Skills and knowledge: <i>Ensure supporting documentation such as copy of certificate is provided</i>	Name of Training course:		
	Course Code:	Date competency achieved:	
Do all food handlers have relevant training (<i>Relevant means relates to the type of food handling</i>):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Other

8. Food Storage and Display

Food storage during transportation:	<input type="checkbox"/> Esky	<input type="checkbox"/> Mobile Cold Room	<input type="checkbox"/> Non-temperature controlled containers
	<input type="checkbox"/> Refrigerator in vehicle	<input type="checkbox"/> Other (please list)	
Food storage within canteen:	<input type="checkbox"/> Esky	<input type="checkbox"/> Mobile Cold Room	<input type="checkbox"/> Non-temperature controlled containers
	<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Other (please list)	
Food display:	<input type="checkbox"/> Hot Box	<input type="checkbox"/> Cold Display	<input type="checkbox"/> Cook to order
	<input type="checkbox"/> Pie Warmer	<input type="checkbox"/> Other (please list)	
What food related processes do you undertake: (please select all that apply)	<input type="checkbox"/> Cooking & selling for immediate consumption (eg: dine in or takeaway)		<input type="checkbox"/> Cooling
	<input type="checkbox"/> Juicing		<input type="checkbox"/> Preparing food (eg: chopping)
	<input type="checkbox"/> Toasting or reheating only of previously cooked food		<input type="checkbox"/> Washing food (eg: fruit & vegetables)
	<input type="checkbox"/> Other (describe)		

How many people, including yourself, will work in the food canteen:	
List any additional equipment you intend to bring into to the canteen:	

9. Food Safety

We will ensure we have following:	<input type="checkbox"/> Designated hand wash basin	<input type="checkbox"/> Paper towel	<input type="checkbox"/> Soap	<input type="checkbox"/> Bin
	<input type="checkbox"/> Food grade sanitiser	<input type="checkbox"/> Detergent		
Temperature monitoring:	<input type="checkbox"/> Probe Thermometer	<input type="checkbox"/> Records	<input type="checkbox"/> Not undertaken	
Provide details of cleaning & sanitising procedures, including the name of the food grade sanitiser you use:				
Do you have processes and procedures for all of the food related activities of your food business:	<input type="checkbox"/> Fully documented	<input type="checkbox"/> Partially documented	<input type="checkbox"/> Not documented	

10. Applicant Declaration

If the application is made by a corporation or incorporated association, the person signing the form must occupy a position that is legally entitled to make an application on behalf of the corporation or incorporated association.

I acknowledge I have read and understood the Fixed Food Business Operation and Construction Guidelines and the Final Inspection Checklist – fixed food premises on the Cairns Regional Council website.

I acknowledge the application fee may not be refundable if assessment of the application has commenced. The application fee includes one inspection, any additional inspections may incur further fees.

I declare that information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.

I am aware that it is an offence to knowingly provide false or misleading information. I am also aware that it is an offence to commence operating a food business without an approved food business licence.

☐ I have read and understood the above declaration.

Name of Individual / Organisation:	
Name of Signatory: <i>If applicant is an organisation</i>	
Position: <i>Proprietor, Director, Manager etc.</i>	
Signature:	
Date:	

Fee Schedule

Category A <i>Fixed premises for a one-off Temporary Event</i>	\$113
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OFFICE USE ONLY Receipt Type T163			
Fee:	Receipt No:	Date:	Officer Name:

Cairns Regional Council – Privacy Statement: Your personal information has been collected for the purpose of assessing your Application for Approval. The collection of your information is authorised under the *Local Government Act 2009*. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the *Information Privacy Act 2009* and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission or the disclosure is required by law.