

Food Act 2006

I / we hereby make an application for

- Accreditation of a food safety program
 Amendment of an accredited food safety program

Existing food business licence no: _____

- If this is a new food business the Application for Food Business Licence form must also be completed and submitted with the required fee.**
 Provide an electronic (or one hard copy) of your Food Safety Program with your application.

Section 1 - Applicant Details*

Applicant name:

Individual's Full Name (Company or Proprietor) **Please note: Applicant must be the same as the Food Business licensee. A trading name or trust cannot hold a licence.**

Trading as:

Postal address:

ABN/ACN:

Contact person name:

Business ph:

Mobile ph:

Email:

Section 2 - Site Details

Site address of premises or place (*Mandatory*):

Real property description (*refer to Rates notice or lease*) Eg: Lot 1 SP 234567

*Logan City Council is collecting your name, the name and location of your business in accordance with the *Food Act 2006* in order to assess your application. This information will only be accessed by employees and/or Councillors of Logan City Council for Council business related activities only. Some of this information may be given to Queensland Health for requisite local government reporting. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

Council use only

LOGAN CITY COUNCIL
PO BOX 3226
LOGAN CENTRAL DC QLD 4114
AB & GST NUMBER
26-627-796 435
WWW.LOGAN.QLD.GOV.AU

ENVIRONMENT AND SUSTAINABILITY BRANCH
ENQUIRIES:
TEL: (07) 3412 3412
FAX: (07) 3412 3444
EMAIL: COUNCIL@LOGAN.QLD.GOV.AU
DOC# 6723702 / FILE # 483479-1

APPLICATION NO: PH/

RECEIPT NO:

Building our COMMUNITIES,
our BUSINESS and our PRIDE



Food Sector (please tick) 3

- Private hospital
- Primary activity is on-site catering at the premises
- Primary activity is on-site catering at *part* of the premises (*serving 200 persons or more on 12 or more occasions per year)
- Off-site caterer
- Aged care
- Child care
- Delivered meals organisation
- Voluntary submission
 - Café or restaurant
 - Food manufacturer
 - Supermarket
 - Other _____

All licensable food businesses are required to have a nominated Food Safety Supervisor. The Food Safety Supervisor must be reasonably available to both Council and food handlers whilst food is being handled. The Food Safety Supervisor must also be able to supervise and give directions to staff about matters of food safety. Please attach the Food Safety Supervisor's Statement of Attainment for the required units of competency. Contact Council for course codes. If you do not know the details of your Food Safety Supervisor, you have thirty (30) days to notify Council once your licence is issued.

Name of food safety supervisor: _____

Business hours contact number: _____

Section 4 - Food Safety Program Submission Checklist

Please tick (3) the appropriate box

Have you identified all food business processes?	Yes	N/A
Purchasing/Receiving		
Dry storage		
Cold storage		
Frozen storage		
Thawing		
Preparation		
Cooking food		
Cooling food		
Reheating and hot holding food		
Serving, self -service and displaying food		
Allergens, food packaging and labelling		
Transporting food		
Off-site events		
Have you systematically identified all potential hazards likely to occur for each food business process?		
For each potential hazard have you identified the controls (including critical control points) and appropriate corrective action to be taken when hazards are found not to be under control?		
Have you identified all required support programs eg pest control, cleaning and sanitation etc.?		
Have you identified all required monitoring records eg temperature control, staff training etc.?		
Have you identified and planned appropriate food safety and hygiene training?		

Section 4 - Food Safety Program Amendment

Please tick (3) if appropriate

- If proposing to change the way food is handled that would result in potential new hazards being introduced, which also require effective control measures, the food safety program must be amended. If yes, provide:
 - an electronic (or one hard copy) of the amended food safety program; and**
 - cover sheet outlining the specific changes made.**
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Section 5 – Certification

As the applicant, I apply for accreditation of a food safety program as part of my food business licence in accordance with the information provided. I am aware that it is an offence to knowingly provide false and misleading information and declare:

1. That I am authorised to sign on behalf of the person (meaning a corporation or individual/s) and commit this person (meaning a corporation or individual/s) in all respects.
2. If written advice of an approved 3rd party auditor is supplied, that the approved 3rd party auditor did not assist or was not involved with the development of the food safety program submitted for accreditation.

Applicant signature _____

Date _____

Name in full _____

Position _____

Section 6 - Fees

Food Safety Program accreditation fees are additional to the food business licence application fees.

- Application for accreditation of food safety program \$ 734.00
 - Application for accreditation of food safety program -
(with written advice of an approved 3rd party auditor supplied) \$ 326.00
 - Application for amendment of food safety program \$ 326.00
-

Credit Card Details

From 1st October 2014 a Merchant Service Fee of 0.5% will be charged on credit card payments

Mastercard ☞

Visa ☞

Card number

Expiry date

Cardholders name _____ Amount \$ _____

I acknowledge that from 1st October 2014 a Merchant Service Fee of 0.5% will be charged and added to this credit card payment

Signature _____

Contact phone number _____