

*Authorising provisions - Food Act 2006*

If you have any specific enquiries regarding how to complete this form please contact council's Healthy Places Unit.  
 Contact number listed at bottom of page 1.

**Application type**
 New Food Safety Program Accreditation

**1. Applicant details**

Title	Surname	Given names
Residential address		
Suburb	State	Postcode
Business phone	Alternate phone	Mobile
Email address		Fax

**2. Business details**

Food Licence number	Trading name	
Postal address (for council correspondence)		
Suburb	State	Postcode
Licensee name	ACN / ABN No	
Preferred contact person		
Business phone	Alternate phone	Mobile
Email address		Fax
Food Safety Supervisor		
Type of food business: <input type="checkbox"/> On-site caterer <input type="checkbox"/> Food service to vulnerable persons <input type="checkbox"/> Off-site caterer <input type="checkbox"/> Other food business _____ <input type="checkbox"/> Private hospital		

**3. Additional Information Required**

The following must be attached to this application:

- A completed Notice of Written Advice from an approved auditor (refer to note below)
- Three (3) hard copies of your Food Safety Program. Where this is an application for an approval of an amendment, please also include a summary of the amendments
- Application fee of \$505.00 (no GST)

Refer to Queensland Health's website [www.health.qld.gov.au](http://www.health.qld.gov.au) for the register of approved auditors.

**Privacy**

Council will use any personal information provided by you for the intended purpose only and for remaining in contact with you. Council is authorised to collect this information in accordance with the Local Government Act 2009 and other Local Government Acts. Your personal information is only accessed by persons authorised to do so. Council may provide information about you to any relevant Queensland State Department. Your personal information is dealt with in accordance with council's privacy policy.

[www.sunshinecoast.qld.gov.au](http://www.sunshinecoast.qld.gov.au) | [mail@sunshinecoast.qld.gov.au](mailto:mail@sunshinecoast.qld.gov.au) | T 07 5475 7272 F 07 5475 7277

Postal address Locked Bag 72 Sunshine Coast Mail Centre Qld 4560 | ABN 37 876 973 913

Caloundra office 1 Omrah Avenue Caloundra Qld 4551

Maroochydore office 10 First Avenue Maroochydore Qld 4558

Nambour office Corner Currie and Bury Streets Nambour Qld 4560

#### 4. Fees

Please tick	Total
<input type="checkbox"/> New Food Safety Program Accreditation – application fee only	\$505.00

#### 5. Declaration of applicant

I/We, the applicant, declare that the above information is correct in all respects, at the time of lodgement of this application with the Sunshine Coast Regional Council. Should any of the details given in relation to this application be changed in the future, the applicant shall advise the Sunshine Coast Regional Council in writing prior to any such change being implemented.

I/We hereby make application for a food business licence under the *Food Act 2006* as set out in this form.

	Name	Signature	Position, eg director, manager	Date
Name 1				
Name 2				

#### OFFICE USE ONLY

<input type="checkbox"/> New food safety accreditation				Charge Type	
Application no.	Amount paid	Date paid	Receipt no.	Initial	Date stamp

#### Payment options

In person	Customer service centres: 8.30 am to 4.30 pm Monday to Friday (excludes public holidays).				
By mail	Cheque or money order to be made payable to: Sunshine Coast Regional Council.				
	<input type="checkbox"/> Cheque	<input type="checkbox"/> Money order	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	
	Card number		Expiry date	Amount \$	
	Name on card		Signature of cardholder		
	Phone	Is a receipt required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	