

Application to Register 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.

If your business sells food you must either register with, or notify, the council in which the premises is located.

Food Act Application for Registration or Notification

There are four classes of food premises – class 1, class 2, class 3 and class 4. The 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 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 3a – Home prepared preserves.
- 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, 3a 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:

- 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 www.health.vic.gov.au/foodsafety

Please mark one of the following:

- The only food handling activities at my premises are as described above. Please complete a notification of a food premises form and submit to Council for confirmation.
- The food handling activities carried out at my food premises involve other activities that are not listed above.

If you marked the second box, you may be required to register with the Council.

Information Privacy

The personal information requested on this form is being collected by Council for the purpose of issuing a permit in relation to a food premises registration service. The personal information will be used by Council for that primary purpose or directly related purposes. The information may also be used to update Council's customer databases to assist Council in discharging its functions or providing services. The personal information collected will not otherwise be disclosed unless permitted or required by law. If the information is not collected we are unable to process your application and provide the service sought by you. Requests for access to and/or amendment of personal information should be made to Council's Privacy Officer.

Please contact the Council to discuss:

- the process for registering your premises using the Application to Register 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 intend to handle high risk foods, which are foods that require temperature control (refrigeration or heating). For example meats, chickens, fish, smallgoods, custard, cream, salads, cooked pasta, eggs and sandwiches.

Note: transfer of registration processes have now changed so Councils are in effect registering a new food premises instead of transferring the details of the old business. In the event one established registered food business is finishing up at an address and a new food business is proposed to start then the current food business operator needs to consent on the final page of this form.

FEES & CHARGES – 2024/2025

CLASS 1 FIRST YEAR REGISTRATION.....	\$625
CLASS 1 ANNUAL REGISTRATION.....	\$417
CLASS 2 FIRST YEAR REGISTRATION.....	\$620
CLASS 2 ANNUAL REGISTRATION.....	\$414
CLASS 3a FIRST YEAR REGISTRATION.....	\$510
CLASS 3a ANNUAL REGISTRATION.....	\$340
CLASS 3 FIRST YEAR REGISTRATION.....	\$399
CLASS 3 ANNUAL REGISTRATION.....	\$266
CLASS 4 NOTIFICATION	no fee

Registration is calendar year with pro-rata discount available on annual registration fee if opening part way through the year.

Transfer of registration fee is effectively the same as 50% of the annual registration renewal fee.

Optional pre-purchase inspection is available for 50% of annual registration renewal fee.

NEW PROPRIETOR DETAILS

BUSINESS NAME _____

COMPANY NAME _____

ABN No. _____ ACN No. _____

Note: If the proprietor is a company or association, specify name of person completing the application form and authority (eg. Director of Company).

PROPRIETOR NAME _____

AUTHORITY _____

POSTAL ADDRESS _____

PHONE (BH) _____ MOBILE _____

EMAIL _____

NEW PREMISES DETAILS

TRADING NAME OF PREMISES _____

STREET ADDRESS _____

POSTAL ADDRESS _____

CONTACT NAME (IF NOT PROPRIETOR) _____

PHONE (BH) _____ MOBILE _____

EMAIL _____

POSTAL ADDRESS _____

TYPE OF FOOD PREMISES _____

FOOD VEHICLE DETAILS (IF APPLICABLE)

REGISTRATION NUMBER _____

MAKE _____ MODEL _____

At what address is the vehicle garaged when not in use?

STREET ADDRESS _____

COMMUNITY GROUP

A community group is a not-for-profit organisation or a person(s) undertaking a food handling activity solely for the purpose of raising funds for charitable purposes or for a not for profit organisation.

Are you a community group that sells food up to two consecutive days at a time and most food handlers are volunteers? YES NO

If NO, go to FOOD RELATED DETAILS section.

Are you selling ready to eat high risk food? YES NO

If NO, you are classified as Class 3. Go to CLASSIFICATION section.

Is all of the high risk food cooked on site with the intention of serving immediately? YES NO

If YES, you are classified as Class 3. Go to CLASSIFICATION section.

If NO, you are classified as Class 2, however, you are exempt from the Food Safety Supervisor requirements. Go to CLASSIFICATION section.

FOOD RELATED DETAILS

This section is to be completed in discussion with the local council. The answers will determine the classification of your food premises into class 1, 2 or 3.

1. Are you a wholesaler / distributor of pre-packaged food? YES NO

If YES, is this the only food handling activity at your premises? YES NO

If YES, you are classified as Class 3. Go to CLASSIFICATION section.

If NO, proceed to question 2.

2. Is the food prepared or served exclusively for people or patients in an aged care service, hospital or meals on wheels service? YES NO

If YES, you are classified as a Class 1. Go to CLASSIFICATION section.

If NO, proceed to question 3.

3. Is the food prepared or served exclusively for children at a childcare centre? YES NO

If NO, proceed to question 4.

If YES, if the food high risk? YES NO

If YES, you are classified as Class 1. Go to CLASSIFICATION section.

If NO, proceed to question 5.

4. Are you a greengrocer that only sells fruit, vegetables and / 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 Class 2. Go to CLASSIFICATION section.

If NO, do you cut / slice fruits and vegetables? YES NO

If YES, you are classified as Class 3. Go to CLASSIFICATION section.

If NO, you do not require a Food Act registration and are only required to complete the notification form.

If none of the above applies to your premises, the classification of your premises will depend upon the risk associated with your food handling activities such as refrigeration and cooking. Please answer the following questions to assist the Council in determining whether your premises is a Class 2 or 3.

5. Do you handle food that does not require refrigeration? YES NO

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

Is any of the food being manufactured on the premises to be sold at retail shops / wholesale / distributor? YES NO

Is any of the food being re-packaged? YES NO

6. Do you refrigerate, cook and / or reheat any 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 below as advised by your Council:

CLASS 1 CLASS 2 CLASS 3a CLASS 3

Classification selection is necessary so that you can complete the remainder of this application form.

For further information, go to www.health.vic.gov.au/food-safety

If your food premise is classified as a class 1 or 2, go to section: **Food Safety Program (FSP)**

If your food premises is classified as a class 3 or, proceed directly to section: **Declaration**

FOOD SAFETY PROGRAM (FSP)

Class 1 and 2 food premises only.

You must complete either question 1 Standard Food Safety Program or question 2 Non Standard Food Safety Program, depending on the type of program used at your premises

1. Do you have a Standard Food Safety Program? YES NO

If NO, proceed to question 2.

If YES, please select the type of FSP and then proceed to FOOD SAFETY SUPERVISOR section.

<input type="checkbox"/>	Food Safety Program template for Class 2 Retail and Food Service Business No. 2 Version 3
<input type="checkbox"/>	Food Smart (online)
<input type="checkbox"/>	Other FSP template registered by the Secretary of Department Health

NAME OF PROGRAM _____

REGISTERED NUMBER OF TEMPLATE _____

2. Do you have a Non Standard Food Safety Program (Independent FSP)? YES NO

Has the program been audited by an approved Food Safety Auditor? YES NO

If NO, specify when the premises is to be audited:

DATE OF AUDIT _____

NAME OF FOOD SAFETY PROGRAM _____

DECLARED QA FOOD SAFETY PROGRAM

Has the FSP been prepared under a QA system or code declared under the Food Act? YES NO

If NO, proceed to FOOD SAFETY SUPERVISOR section.

If YES, 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 confirming that the program has been prepared under and conforms with that QA system or code.

If NO, specify the date when the audit is to be undertaken: _____

Does the FSP include competency based or accredited training for staff of the premises? YES NO

If YES, you are exempt from the Food Safety Supervisor requirement.

DOCUMENTS REQUIRED FOR QUALITY ASSURANCE AND AUDITED PREMISES

Class 1 premises requires:

- Copy of the non-standard / independent food safety program

- A current certificate from an approved food safety auditor indicating that the FSP is adequate, only if applicable.

Class 2 premises requires:

- A current certificate from an approved food safety auditor stating that the FSP meets the requirements of the Act, only if applicable.
- 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).

Note: There are no documents required if you have a template standard food safety program.

FOOD SAFETY PROGRAM – CLASS 1 AND 2 ONLY

Does your commercial business have a nominated Food Safety Supervisor? YES NO

If YES, please provide the name of the Food Safety Supervisor: _____

Please attach a copy of the Food Safety Supervisors qualifications and certificates.

Note: a Food Safety Supervisor is **NOT** required if the food premises:

- Has a declared QA Food Safety Program that includes competency based or accredited training for staff of the premises; or
- Is a community group that is exempt, as described on page 2 of this form.

DECLARATION OF NEW PROPRIETOR

Class 1, 2 and 3 food premises

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge.
- This application is a legal document and penalties exist for providing false or misleading information.

Class 3 food premises only

In addition to the above and by ticking this box, I acknowledge that I will ensure that the appropriate minimum records required under the *Food Act* for the premises will be kept.

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.

Signature: _____ Signature: _____

Print name: _____ Print name: _____

Date: _____ Date: _____

WHEN TRANSFERRING ESTABLISHED BUSINESS PROPRIETORSHIP

Previous or current Proprietor details where available

PROPRIETOR NAME _____

Note: If the proprietor is a company or association, specify name of person completing the application form and authority (eg. Director of Company).

AUTHORITY _____

ABN No. _____ ACN No. _____

POSTAL ADDRESS _____

PHONE (BH) _____ MOBILE _____

EMAIL _____

Consent from previous proprietor to transfer the proprietorship from the previous proprietor to the new proprietor listed on the start of this form.

Signature: _____ Signature: _____

Print name: _____ Print name: _____

Date: _____ Date: _____

PAYMENT OPTIONS

CONTACT US

Phone **03 5760 2600** to make an credit card payment over the phone.

Email:
council@benalla.vic.gov.au

IN PERSON

Visit the Council's Customer Service Centre at
1 Bridge Street East, Benalla

MAIL

Send this application back to us with a cheque for the full amount made payable to
Benalla Rural City Council
PO BOX 227
BENALLA VIC 3671

OFFICE USE

Date received

Receipt number