

## **Request to Register Food Business**

## Guidance

This form is for the registration of a new food business or changing the details of an established business.

You can lodge the completed application form by:

Email: council@shellharbour.nsw.gov.au

In person: Council's Civic Centre at 76 Cygnet Avenue, Shellharbour City Centre

1. Business Details				
This application is for:				
a new food business registration		changing the details of an established business (existing application number FD/)		
Business Name				
Address				
2. Type of Food Business	S			
Please indicate:				
□Cafe	☐ Club / Pub / Hotel			
☐Bakery	Supermarket			
Delicatessen	☐ General Shop / Corner Store			
☐Take Away	☐ Petrol Station			
Restaurant	Other			
3. Proprietor Details				
Organisation Name / Company Name (if applicable)				
ABN				
Name of business owner				
Address				
Preferred contact number Email				

4. NSW Planning Approval				
Provide details of NSW Planning Approval for the Activity of a Food Business e.g Development Approval / Construction Certificate Number etc.				
5. Food Safety Supervisor Details				
Name of Food Safety Supervisor				
Certificate Number	Expiry Date			
6. Declaration				
As the applicant, I hereby apply for registration of the food premises as described in this application. Council will need to determine if you have Planning Approval to undertake a food business activity at the nominated address. You will then be notified if your application is successful.  I acknowledge that my details will be entered into Councils Food Premises Database and that the food premises will also be inspected by Council Environmental Health Officers (there are prescribed inspection/administration fees associated when an inspection is carried out).				
Applicant / Business Owner Name				
Signature	Date			
7. Fees and Charges				
For a listing of applicable fees to accompany this application please refer to Council's Schedule of Fees & Charges				
OFFICE USE ONLY				
Administration Category	Inspection Category			
Application Number	Fees Paid			
	\$			
Date Paid	Receipt Number			