



CASSOWARY COAST REGIONAL COUNCIL
FORM 2

PO Box 887, 70 Rankin Street
INNISFAIL QLD 4860
Phone: 1300 763 903
Email: enquiries@cassowarycoast.qld.gov.au

APPLICATION FOR FOOD BUSINESS LICENCE
CHANGE OF LICENSEE NEW OR ALTERED
FOOD ACT 2006

APPLICATION & PLANS

Please complete all relevant sections of the application form and submit completed application together with the relevant fee and plans at least 14 days prior to business operating.

Include a Floor Plan, drawn to scale not less than 1:100, showing details of the layout of all equipment, fixtures and fittings in a bird’s eye view (looking down on the premises).

APPLICATION TYPE

- | | | | |
|------------------------|--------------------------|---------------------------|--------------------------|
| New Food Business | <input type="checkbox"/> | Home Business for Markets | <input type="checkbox"/> |
| Alteration to Premises | <input type="checkbox"/> | Mobile Food Business | <input type="checkbox"/> |
| Change of Licensee | <input type="checkbox"/> | Fixed Food Business | <input type="checkbox"/> |

APPLICANT DETAILS

Name & Address of Applicant (Individual or Company name in full):

.....
.....

ABN / ACN:.....

Not-For-Profit Organisation Yes – please attach supporting documentation from the ATO

Phone: Email:.....

INCORPORATED ASSOCIATIONS

Name President:

Name Secretary:

Registered Office Address:.....

Name Manager:

Phone: Email:.....

FOOD BUSINESS DETAILS

Trading Name and Location Address:.....

.....

Business Phone:..... Business Email:.....

Have you contacted Council’s Planning Department to ensure that you can lawfully operate from the premises? YES NO

NOMINATED FOOD SAFETY SUPERVISOR

Who is your nominated Food Safety Supervisor?

Email: Phone:

Supervisors skills, knowledge, experience, certificates:

.....

SUITABILITY TO HOLD A FOOD BUSINESS LICENCE

Do you have the appropriate skills and knowledge to sell safe and suitable food under the licence?

Please tick Yes / No

Please provide copies of certificates or details of courses

Have any of the applicants been convicted for a breach of any food legislation?

Please Tick Yes / No

If the applicant is a corporation or an incorporated association, this includes an executive officer of the corporation or a member of the association’s management committee.

Have any of the applicants previously held a licence under the *Food Act 2006*, or a corresponding law that was suspended or cancelled?

Please Tick Yes / No

Have any of the applicants been refused a licence under the *Food Act 2006*, or a corresponding law?

Please Tick Yes / No

FEE SCHEDULE 2022-2023

The term of an annual food business licence applies from 1st October to 30th September each year.

	Half Yearly Fees 1 April – 30 September	Annual Fees 1 October – 30 September
CATEGORY 1 - Food preparation at home for markets (NPHF)	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$200.00
CATEGORY 2 - Low Risk (eg: juice bars)	<input type="checkbox"/> \$144.50	<input type="checkbox"/> \$289.00
CATEGORY 3 - Medium Risk (eg: Café, Restaurant, T/A)	<input type="checkbox"/> \$195.00	<input type="checkbox"/> \$390.00
CATEGORY 4 - High Risk (eg: Child, Aged Care & Hospitals)	<input type="checkbox"/> \$250.50	<input type="checkbox"/> \$501.00
CATEGORY 5 - Premises with 2+food preparation areas (eg: supermarkets or resorts)	<input type="checkbox"/> \$472.50	<input type="checkbox"/> \$945.00
CATEGORY 7 – Water Carrier Permit (domestic)	<input type="checkbox"/> \$ 75.50	<input type="checkbox"/> \$151.00
ACCREDITATION OF A FOOD SAFETY PROGRAM	<input type="checkbox"/> \$667.00	
AMENDMENT OF A FOOD SAFETY PROGRAM	<input type="checkbox"/> \$413.00	

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 declare that the 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.

Print Name:

Signature of Applicant:

Date:

OFFICE USE

Cashier Initials	Fee Paid	Date	Receipt Number	Application Number

The Cassowary Coast Regional Council respects your privacy. Your personal information has been collected for the purpose of assessing your Application for a Food Business Licence. The collection of your information is authorised under the Food Act 2006. Your personal information will not be disclosed to any other person or agency unless you have given your permission or Council is required to do so by law. You may apply to access this information on the form obtainable from Council Website at any time.