

Registration - Food Business

Port Stephens Council is collecting your business details in accordance with the Food Act 2003. Particulars are to be provided in order to register your food business with Council. This form is to be used if you are a new business, taking over an existing business or change of details.

OFFICE USE ONLY

Date of Receipt:

File No: PSC

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Applicant Details

Applicant/s Name

Residential Address

Phone Mobile

Email

Business Details

- New Business Taking over a food business Change of details

Business Trading Name

Previous Business Trading Name (if applicable)

Business Address

Business Owner Details

Business Phone ABN

Postal Address Residential Address Business Address Other (please specify below)

Food Safety Supervisor Name Certificate No.

Date of Certificate

Which best describes your Food Business type?

- Bakery Caterer Fruit & Vegetable Shop Restaurant
- Cafe Childcare Centre B&B Service Station
- Canteen Delicatessen Hotel Takeaway
- Water Carter <ca Y'6i gjbYgg.....Other (please specify below)

Declaration and Signature of Applicant/s

I/We hereby make application to Council for permission to operate a food business in the Port Stephens Local Government Area. I/We confirm that the above particulars are true and correct and that I/we agree to abide by the Food Act 2003. I/We understand that the business will be subject to regular food safety inspections by Council's Environmental Health Officers.

x x Date

Submit

Please return your completed and signed application to:

In person/mail:

**116 Adelaide Street/PO Box 42
Raymond Terrace NSW 2324**

Online: