

FOOD BUSINESS NOTIFICATION/REGISTRATION FORM FOOD ACT 2008

Food Business Details Trading Name of Food Business: Food Business Address: Postal Address: Business Ph: Mobile: **Business Email:** ABN: If you would also like to have your food business details added to the Experience Nannup App once your registration is complete, please visit the following link and upload your public details https://www.nannup.wa.gov.au/experience-nannup/experience-nannup/listings-on-experiencenannup-app.aspx **Food Business Proprietors Details** Title: Mrs Ms Other Proprietor 1 Name(s) of Proprietor: Proprietor 2 Name(s) will appear on Certificate of Registration if applicable. Address(es) of Proprietors: Proprietor Email Address: Proprietor Ph: Preferred Contact Person: Please tick all that apply -Locations for preparing or storing food (more than 1 may apply) -**Commercial Premises** Address: Residential Premises

Garage address:

Number plate:

Number plate:

Garage address:

Food van

Food transport vehicles

La	belling		Producing own labels		Selling already packaged food		
Transporting food		_			Via a passenger vehicle		
110	ansporting tood	Ц	via a 1000 transport verilcie	Ц	via a passerigei veriicie		
Activities			Catering for groups		☐ Child care centre, aged care, delivered meals business		
Please provide a summary of all food products to be sold and approximate quantities (or attach menu /product list) e.g. packaged foods, jams, cakes, chutney, sandwiches, soup, bread, meat, ready to eat meals, coffee, smoothies, salads, seafood, chicken, ice-cream, etc. Quantity							
Please tick if making or selling any of the following foods –							
	Aioli, Hollandaise, Tiramisu		☐ Fermented foods (ie. kombucha)	С	☐ Dried cured meats		
	Oysters		□ Pâté		☐ Bean sprouts ☐ Sus	shi	
How	v many food handl	ers \	will be working in the busines	ss?			
The Shire of Nannup provides free access to the FoodSafe training course for registered food business owners and employees which can be accessed at https://www.ehawa.org.au/events/event/foodsafe-online . Please contact the Shire prior to registering so that a voucher for the cost can be provided to you.							
CH 0 0 0 0	Plan layout of food Details of proposed List of equipment (l prer d ope fridg	nise	fryer e	•	PLICATION:	
Declaration: I, the person making this application declare that the information contained in this application is true and correct in every particular;							
Signature of Applicant:				Date: _	Date:		
In ti	In the case of a company, please state your position:						

The information gathered in this form will be used for purposes related to the administration of the *Food Act 2008* (WA). In accordance with regulation 51 of the Food Regulations 2009 (WA), certain details (proprietor name, trading name and address details) may be made publicly available.