	Goondiwindi Regional Council LMB 7, Inglewood QLD 4387 Telephone 07 4671 7400 Facsimile 07 4671 7433 Email Website Www.grc.qld.gov.au Www.grc.qld.gov.au		
Food Act 2006	Food Business Licence Application		
	Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.		
	Application is for       Restoration       Fee \$         Application       Fee \$       Restoration       Fee \$		
	Renewal         Fee \$		
	Amendment Fee \$		
	Applicant/s details		
If applicant is a company, insert company name and	Company name ACN / ARBN		
ACN / ARBN	Title Mr Mrs Ms Miss Other (specify)		
	Family name		
	Given names		
	Position		
	I declare the information provided in this application to be true and correct.		
	Signature   Date   / / /		
	Title Mr Mrs Ms Miss Other (specify)		
	Family name		
	Given names		
	Position		
	I declare the information provided in this application to be true and correct.		
	Signature   Date   / _ / _ / /		
Current Food Business Licence No.	Licence no. Expiry date		
	Contact details		
Select as applicable.	Business Private		
	Contact person		
	Postal address		
	Locality / Suburb State Postcode		
	Contact fax		
Office Use Only Entered by			
Application no.			

V2 May 2019 Page 1 of 4 Goondiwindi Regional Council is collecting this information in order to comply with its responsibilities and obligations as a Local Government. The information will only be used by Council Officers or Agencies which may have a legitimate need for the information to process applications or the like. Your information will not be given to any other person or Agency until you have given us permission or we are required to by law.

	Business details		
Business name must be registered with the Office of Fair Trading.	Business name		
-	Street address		
If a vehicle or stall – advise exact location??			
	Locality / Suburb	State	
Enter postal address if different from street address.	Postal address		
	Locality / Suburb	State Postcode	
	Contact person		
	Contact ph.		
	Contact fax		
Real property description – refer to Rates Notice.	Lot no. Reg. plan no.	Parish	
	Description of food business: (eg. café, restaurant, cannery, etc)		
	Does your business involve any off-site catering? Yes	No	
Trading Hours			
j in i			
	Vehicle details		
	Do you deliver food in a vehicle?	No	
	Do you handle or prepare food in the vehicle?	No	
	If yes, how many vehicles do you use?	6 – 10 11+	
	Vehicle details		
If there are additional	Туре	Reg no.	
vehicles, please attach	Туре	Reg no.	
additional vehicle information to this form.	Туре	Reg no.	
	Туре	Reg no.	
	Туре	Reg no.	

## Current approval details

Please insert your approval number for each approval type issued by Local Government.

Approval Type	Approval No.	Office Use Only
Building approval		
Plumbing and drainage approval		
Development approval		
Trade waste approval		
Other – please specify		

	Suitability of person to hold a licence			
	Skills & knowledge of applicants to sell safe and suitable food:			
	Have any of the applicants been convicted for a breach of any food legislation? If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included.			
	Have any of the applicants previously held a licence under the Food Act 2006, the Food Act 1981 or a corresponding law that was suspended or cancelled? If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included.			
	Have any of the applicants been refused a licence under the Food Act 2006, the Food Act 1981 or a corresponding law? If the applicant is a corporation or an incorporated association, an executive officer of the corporation or a member of the association's management committee are included.			
	No Ves If Yes, please attach details			
	Nomination of food safety supervisor         Note: If you do not know the details of your food safety supervisor(s) at this time, do not complete this section. This will not affect the decision made on your application. However, you are required to provide the local government details of your food safety supervisor(s) within thirty (30) days of receiving your licence.         Food safety supervisor details			
	Name			
	Address			
	Business hours contact no			
Complete only if applying	Amendments			
for an amendment	Provide details of proposed amendments			

	Attachments		
Please attach.	1. Two (2) copies of a Site Plan, drawn to scale not less tha storage, car parking, staff and public toilet facilities and a	0 1	
	<ol> <li>Two (2) copies of a Floor Plan, drawn to scale not less th fixtures and fittings in a bird's eye view (looking down on</li> </ol>	, , , , , , , , , , , , , , , , , , , ,	
NOTE: Applications for Renewal of Licence do not require attachments to be resubmitted.	Sink details should be provided, including the type of sink (single bowl, double bowl, triple bowl, wash hand basin, or cleaner's sink), and the dimensions (or the size and depth of the sink). The floor plan should also indicate the type of materials and finishes used on equipment, fixtures, fittings, floors, walls and ceiling (such as stainless steel or laminated work benches, walls and ceilings finished in a high gloss paint and ceramic tiled floor with epoxy grouting).		
	3. Two (2) copies of a Sectional Elevation, drawn to scale not less than 1:50, showing a side-on view of the walls of the premises and should indicate the height of structures, benches, equipment and fixtures, including fixtures, fittings and equipment within cool rooms / freezer rooms (if applicable)		
		Two (2) copies of a Hydraulic plan (plumbing and drainage plan), drawn to scale not less than 1:50, showing the location of water and sewage pipes and connection types, tundishes and grease traps	
	<ul> <li>Two (2) copies of a Mechanical Exhaust Ventilation Plan, drawn to scale of not less than 1:50, if mechanical exhaust systems are to be installed.</li> </ul>		
		Two (2) copies of a Transport Vehicle Plan, drawn to scale of not less than 1:50, showing details of the layout of all the equipment, fixtures and fittings and the types of materials used.	
	7. Full explanation of selected box/es in the Suitability of pe	Full explanation of selected box/es in the Suitability of person to hold a licence section (if applicable).	
	Please note: This application and fee MUST be lodged with your Council.		
	Office use only		
	Fee	Date / /	
	Scheduled category	File no.	

Access no.

Licence no.

Receipt no.

Registration no.