



Townsville City Council
Environmental Health Services

FOOD ACT 2006 >>

APPLICATION TO AMEND A CURRENT FOOD LICENCE

>>Please ensure you submit this application at least 30 days before commencement of trade to allow us to process your application in time.

>> Please call Environmental Health Services on 1300 878 001 for further information

PRIVACY COLLECTION NOTICE:

You are providing information which will be used for the purpose of delivering services and carrying out council business. Your personal information is handled in accordance with the Information Privacy Act 2009 and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given us permission or the disclosure is required by law.



Application – Food Premises Amendment

Please note if you wish to apply to be a **NEW licensee of a currently licensed food business, you will be required to apply for a new food licence.**

Please read the application form carefully and complete all applicable sections.

1. What are you applying for? *(Please tick one)*

Amendment To An Existing Licence - Which of the following actions do you (as the licensee) wish to complete?

Change the business address/details on your current food licence (complete sections 2, 3, 4, 5 & 9)

Change a condition on your current food licence (complete sections 2,3, 4, 7 & 9)

Remove an additional licensee from your current food licence (complete sections 2, 3, 4, 6 & 9)

Making a structural amendment to your licensed premises (complete sections 2, 3, 4, 8 & 9)

2. What is the current food licence number for the business?

3. What is the intended date the changes will begin from?

4. Details of applicant/licensee applying for the change/s

(All remaining licensee(s) on the current food licence are to complete this section)

Applicant suitability statement, declaration and signature

Have you ever had a licence refused, suspended or cancelled, or been found guilty of an offence under the *Food Act 2006, Food Act 1981* or corresponding law in other States or Territories?

No Yes *(Give details in an attachment)*

I understand that the information provided in and accordance with this application may be disclosed publicly under the *Evidence Act 1977*. I am aware that it is an offence to knowingly provide false or misleading information.

PLEASE NOTE *If this 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.*

Licensee 1: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> Name of Individual / Organisation <input type="text"/> Name of Signatory <i>(if licensee is an Organisation)</i> <input type="text"/> Position <i>(Proprietor, Director, Manager)</i> <input type="text"/> Signature: <input type="text"/> Date: <input type="text"/> Contact number: <input type="text"/>	
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Licensee 2 <i>(if applicable)</i>: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> Name of Individual / Organisation <input type="text"/> Name of Signatory <i>(if licensee is an Organisation)</i> <input type="text"/> Position <i>(Proprietor, Director, Manager)</i> <input type="text"/> Signature: <input type="text"/> Date: <input type="text"/> Contact number: <input type="text"/>	
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6. Removing an additional licensee from a current food licence

(Please note the licensee wishing to be removed must sign to declare they agree to the amendment)

Name of licensee to be removed *(either an individual or corporation):*

Vendors Declaration *(to be completed by the licensee being removed):*

PLEASE NOTE *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, *(full name)* _____ declare that I am no longer the operator (licensee) of the above mentioned business and wish to be removed as a licensee effective from ____/____/____ (please complete previous licensee details below).

Previous Licensee: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> Name of Individual / Organisation <input type="text"/>	Contact number: <input type="text"/>
Name of Signatory <i>(if licensee is an Organisation)</i> <input type="text"/>	Postal Address: <input type="text"/>
Signature: <input type="text"/>	Date: <input type="text"/>



7. Change of Licence Condition

(Please indicate what you wish to change)

PLEASE NOTE under the Food Act 2006, every food licence is required to have a set of mandatory conditions – **those which cannot be amended.**

If you are applying to change a licence condition on a current licence, please include details of the proposed changed and provide a reason why you wish to change this condition i.e. how is it no longer relevant to your activities?

- Applying for a licence condition to be changed?
- Applying for a licence condition to be removed?

Licence condition and number on current food licence:

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Amendment to be considered and/or reason for amendment:

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8. Amendment to Floor Plan - refurbishing of a licensed premise

It is your responsibility to ensure you obtain any other relevant approvals from council. These may include: Development Permits under the City Plan, Building Permits, Trade Waste approvals and/or Hydraulic Service approvals.

- a) **FLOOR PLANS** - Plans are required to be submitted with this application if you are fitting out a new premise or making changes to an existing one. Plans can be submitted in hard copy or an electronic version.

Floor plans and other details (as described below) have been included: Yes

>> Two copies of the following plans (drawn to scale not less than 1:50 on A3 paper) must be provided:

- o Floor plans including waste disposal facilities and location of equipment.
- o Elevations of each food preparation room / area.

>> If relevant, mechanical exhaust ventilation plans (must comply with AS1668 part 2) – including the layout and design of the canopy, ducting and discharge points as well as specifications of all equipment being serviced by the exhaust system. Calculations of flow rates for the exhaust must also be included.

>> Any technical reports or other information such as brochures or photos can be attached to accompany the plans

- b) **KITCHEN DESIGN AND DETAILS - The section below is to be completed**

You will need to describe all details relevant to the changes being made in the boxes provided below. All information included on this application form is to be clearly indicated on the submitted plans.

Refer to council's 'Design and Construction Criteria' for explanatory notes >>

www.townsville.qld.gov.au/business/foodsafety/Pages/newbusiness.aspx

<p>Ceiling Describe the NEW roof/ceiling:</p> <ul style="list-style-type: none"> • What material is it made from • Design • Colour 	
<p>Walls Describe the NEW walls:</p> <ul style="list-style-type: none"> • What material is it made from • Design • Colour 	
<p>Flooring & coving Describe the NEW flooring & coving :</p> <ul style="list-style-type: none"> • What material is it made from • Design • Colour 	
<p>NEW Cooking equipment/kitchen appliances Describe what additional equipment is being installed i.e. washing up sinks, hand wash basins, oven, deep fryer, cold room etc.</p>	



<p>Addition of ventilation systems</p> <ul style="list-style-type: none"> - If electrical or gas powered equipment is being installed, will ventilation be adequate and in accordance with legislation? - Copies of mechanical exhaust system plans must be attached 	<p><input type="checkbox"/> Yes, ventilation is in accordance with:</p> <ul style="list-style-type: none"> - Australian standard 1668:2012 part 2 (The use of ventilation and air-conditioning in buildings) - Building Code of Australia <p><input type="checkbox"/> Mechanical exhaust system plans are attached to this application</p>
<p>Any other changes being made which aren't covered in the above sections?</p>	

9. PAYMENT OPTIONS *(select one payment option ONLY)*

- IN PERSON** I have made payment in person at a council customer service desk upon submission of my application
- VIA PHONE** I wish to be contacted to pay over the phone via credit card (0.5% surcharge applies)
 >> Contact number: () _____
- CHEQUE** (must be received with application)

>> Application can be submitted in one of the following ways:

- **Email:** enquiries@townsville.qld.gov.au
- **Postal:** PO Box 1268, Townsville, QLD 4810
- **Council's customer service desks located at:**
 - 103 Walker St, Townsville City
 - 86 Thuringowa Drive, Kirwan

CUSTOMER SERVICE USE ONLY			
Licence No.:		Fee:	
DWX Web Ref.:		Receipt	
Assessment No.:		Date:	

