

APPLICATION FOR DOMESTIC KITCHEN LICENCE

Food Act 2006



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| Purpose | <p>This application is ONLY for farm stay or bed and breakfast businesses, or for the manufacturing of cakes, biscuits, slices, confectionary or preserves on a small or limited scale. This food licence DOES NOT apply to selling to other resellers (wholesale), selling on a commercial scale, or making potentially hazardous foods.</p> <p>Please submit this application at least 30 DAYS before commencement of trade to ensure your application is processed on time. Contact the Environmental Health and Regulatory Services Team on 13 48 10 for more information.</p> |
| Property-owner's permission | <p><input type="checkbox"/> I declare that I have the property-owner's permission to conduct a domestic kitchen food business.</p> <p>Note: Evidence of the property-owner's permission MUST be attached (e.g. print of SMS screenshot or signed statement).</p> |
| Business details | <p>Trading name _____</p> <p>Trading start date _____</p> <p>Address where activity will be carried out (NOT a post office box) _____</p> <p>Suburb _____ State _____ Postcode _____</p> <p>Business phone number _____</p> <p>Email address _____</p> |
| Applicant/ licensee details Complete either individual OR company as applicable | <p>Individual 1</p> <p>Full name _____</p> <p>Postal address _____</p> <p>Suburb _____ State _____ Postcode _____</p> <p>Contact phone number _____</p> <p>Email address _____</p> <p>Individual 2</p> <p>Full name _____</p> <p>Postal address _____</p> <p>Suburb _____ State _____ Postcode _____</p> <p>Contact phone number _____</p> <p>Email address _____</p> |

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| Applicant/ licensee details Complete either individual OR company as applicable | Corporation/ incorporated association Note: A copy of the company extract which lists the directors of the company MUST be attached (a company or business registration certificate cannot be accepted). Legal entity name _____ Australian company number _____ Postal address _____ Suburb _____ State _____ Postcode _____ Contact name and number _____ Email address _____ |
| Applicant/ licensee suitability statement | Have you ever had a licence refused, suspended or cancelled, or been found guilty of an offence under the <i>Food Act 2006</i> , <i>Food Act 1981</i> or corresponding law in other states and territories? <input type="checkbox"/> No <input type="checkbox"/> Yes (give details in an attachment) |
| Applicant/ licensee declaration | I declare that the particulars provided on this form are true and correct in every detail. I am aware that it is an offence to knowingly provide false or misleading information. 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. Signature _____ Print name _____ Position (if relevant) _____ Date _____ |
| Payment options | <input type="checkbox"/> In person: I will pay any fees at a Council Customer Service Centre upon submission of my application <input type="checkbox"/> Via phone: Contact me for my credit card details. Contact number: _____ (Visa or MasterCard payments are subject to a 0.5% payment processing fee) <input type="checkbox"/> Cheque (must be received with application) |
| Privacy collection statement | Townsville City Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which council manages personal information is governed by the <i>Information Privacy Act 2009</i> . We are collecting your personal information in accordance with the <i>Food Act 2006</i> . The information will be used to process this food licence application, update council's records, and undertake any compliance-related activities where necessary. Generally, we will not disclose your personal information outside of council unless we are required to do so by law, or unless you give your consent to this disclosure. For further information about how we manage your personal information please see our Information Privacy Policy. |
| Submit the form | Via email: enquiries@townsville.qld.gov.au By mail: Townsville City Council, PO Box 1268, TOWNSVILLE CITY QLD 4810 In person: Townsville City Council's Customer Service Centres located at: <ul style="list-style-type: none">• 103 Walker Street, Townsville City cash (cheque, EFTPOS and/or credit card (Mastercard or Visa)• Customer Service Point, Riverway CityLibraries, 20 Sporting Drive, Condon. (Card Only) |

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Application checklist

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| Planning approval | <p>As outlined in the Townsville City Plan, a home-based business:</p> <ul style="list-style-type: none">• uses no more than 60m² of the dwelling• uses no more than one non-resident employee• does not generate more than 14 trips per day (each visit to and from the dwelling equals 2 trips)• has visitor parking onsite• only operates from 8am to 5pm Monday to Friday and 8am to 2pm on Saturday, with no operation on a Sunday. <p>Do you meet the above general planning requirements for a home-based business?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – you must contact Council’s Planning Services Team to discuss the suitability of your home business in the proposed location. The Planning Services Team can be contacted on 13 48 10. Please provide a copy of the written evidence (letter or email) you have received regarding your location’s suitability with this application.</p> |
| Nature of the business | <p><input type="checkbox"/> Prepare from home and sell from home</p> <p><input type="checkbox"/> Prepare and package at home, then sell at markets/events</p> <p><input type="checkbox"/> Prepare at home and sell unpackaged at markets/events</p> <p><input type="checkbox"/> Prepare and sell food as part of a bed and breakfast or similar</p> <p><input type="checkbox"/> Other (please describe) _____</p> <p>_____</p> <p>_____</p> |
| Business operation | <p><input type="checkbox"/> Purchased at least one digital probe thermometer which is readily available at all times AND accurately measures temperature to +/- 1°C</p> <p><input type="checkbox"/> Contacted Queensland Health for advice on packaging and labelling requirements</p> <p><input type="checkbox"/> Access to a first aid kit (with coloured, waterproof plasters)</p> |
| Type of food being manufactured | <p>Please note: all food must be prepared in the licensed kitchen. All ingredients must be sourced from a reputable supplier.</p> <p>Describe the food you will be manufacturing/selling _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Does the final product need to be stored in the fridge?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |

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| Markets/events trading from Complete if relevant | Name of markets/events | How often? |
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| Food for Thought e-newsletter | <p>Would you like to subscribe to Council's electronic newsletter on food safety issues? This e-newsletter is published monthly via email. You may unsubscribe at any time.</p> <p><input type="checkbox"/> Yes, please email me the <i>Food for Thought</i> e-newsletter at the email address/es provided in the applicant/licensee details section, or to: (add alternate email) _____</p> <p><input type="checkbox"/> No</p> |
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| Nomination of food safety supervisor | <p>All licensed food businesses must have a food safety supervisor.</p> <p><input type="checkbox"/> I will nominate a food safety supervisor within 30 days of receiving the food licence. Note: A nomination form is available on Council's website.</p> <p><input type="checkbox"/> I will nominate a food safety supervisor with this application. Complete the food safety supervisor section below.</p> <p>Full name _____</p> <p>Contact phone number _____</p> <p>Email address _____</p> <p>Proof of specific food safety knowledge must be provided. Please specify what evidence is being provided:</p> <p><input type="checkbox"/> Statement of attainment course and institution Note: A copy of the certificate/s MUST be attached.</p> <p>OR</p> <p><input type="checkbox"/> Describe all specific food safety related experience</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> |
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| Floor plans | <p>Plans of the food preparation area are required to be submitted with this application. Floor plans should be drawn to scale and can be submitted in hard copy or as an electronic version.</p> <p>The floor plans must show the location of all equipment, including washing facilities, storage areas and preparation benches.</p> <p>Any technical reports or other information such as brochures or photos can be attached to accompany the plans.</p> <p><input type="checkbox"/> I have included a floor plan with this application</p> |
| Kitchen details All materials must be smooth, impervious and easy to clean. | <p>Ceiling</p> <p>Surface coating/finish _____</p> <p>Colour _____</p> <p>Walls</p> <p>Surface coating/finish _____</p> <p>Colour _____</p> <p>Flooring</p> <p>Surface coating/finish _____</p> <p>Colour _____</p> <p>Coving</p> <p><input type="checkbox"/> Coving is provided at the floor and wall intersection</p> <p><input type="checkbox"/> No coving at the floor and wall intersection</p> <p>Lighting</p> <p><input type="checkbox"/> Sufficient natural or artificial lighting</p> <p>Ventilation</p> <p><input type="checkbox"/> Domestic range hood</p> <p><input type="checkbox"/> Commercial exhaust canopy</p> <p><input type="checkbox"/> None (adequate natural ventilation)</p> <p>Equipment cleaning and sanitisation</p> <p>Note: All food contact surfaces, equipment and utensils must be able to be effectively cleaned and sanitised.</p> <p><input type="checkbox"/> Double bowl sink with hot water; OR</p> <p><input type="checkbox"/> Single bowl sink with hot water, plus a dishwasher (adequate to fit the largest piece of equipment)</p> <p>AND</p> <p><input type="checkbox"/> Food grade sanitiser for benches, surfaces and equipment</p> |

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Hand washing facilities

- Designated sink for hand washing with a warm water supply delivered through a common spout; OR
 - Using the same sink for washing up, which will be thoroughly cleaned and sanitised between uses
- AND
- Liquid soap and single use paper towels

Dry food storage areas

- Separate from personal items
- Segregated from other food items for personal use

Cold and frozen food storage areas

- Designated refrigeration and freezer units
- Same refrigeration and freezer units with food segregated from other food items for personal use

Food transportation

Note: The vehicle method of transportation must be kept in a clean condition to protect food from contamination and suitable to maintain temperature control.

- Designated food transport vehicle
- Food will be stored in a cooler box and/or sealed containers for transport in personal vehicle

Waste disposal

- Premises is connected to Council's sewerage system
- Premises is connected to septic
- Premises is regularly serviced by Council for solid waste and recyclable collection