

# Application for Amendment of Food Business Licence

## Food Act 2006

### IMPORTANT NOTICE

Western Downs Regional Council is collecting personal information you supply on this form in accordance with *Food Act 2006*. The personal information collected on this form will be used to administer the act and maintain a register of Licensed Premises. Your personal information will be accessed by persons who have been authorised to do so. Some of this information may be given to Queensland Health for the purpose of administering the act. Your information will not be given to any other person or agency unless required by law. Your personal information is handled in accordance with the *Information Privacy Act 2009*.

| Application for:         | Amendment Type  | Fee      |
|--------------------------|---|----------|
| <input type="checkbox"/> | Amendment to Licence - Alteration of a Premises                   | \$216.00 |
| <input type="checkbox"/> | Amendment to Licence - Temporary Premises (Camp Kitchen) Location | \$17.00  |
| <input type="checkbox"/> | Amendment to Licence - Alteration to Trading Name only            | \$NIL    |



### Licence Details

|                               |  |            |                 |     |   |
|-------------------------------|--|------------|-----------------|-----|---|
| Current Premise/Trading Name: |  |            | Licence Number: | EH: | - |
| Proposed Trading Name:        |  |            |                 |     |   |
| Applicant Name:               |  |            |                 |     |   |
| Contact Person:               |  |            |                 |     |   |
| Phone (w):                    |  | Phone (m): |                 |     |   |
| Email Address:                |  |            |                 |     |   |



### Current Premise Details

|              |  |                                   |  |
|--------------|--|-----------------------------------|--|
| Address:     |  |                                   |  |
| Suburb:      |  | Postcode:                         |  |
| Lot on Plan: |  | Property Name<br>(if applicable): |  |



### Proposed Premise Details (For amendment to location for Temporary Premises - Camp Kitchen)

|                              |  |                                      |  |
|------------------------------|--|--------------------------------------|--|
| Address:                     |  |                                      |  |
| Suburb:                      |  | Postcode:                            |  |
| Lot on Plan:                 |  | Main Gate GPS<br>(HDMS) coordinates: |  |
| End Date at current premise: |  | Commencement at<br>proposed premise: |  |



### Amendment Details (Please attach additional pages and attachments as required)

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### Attachments for Alteration of Premises (if providing electronic attachments, plans must be to relevant scale when printed on A3)

- Two (2) copies of a Site Plan, drawn to scale not less than 1:100, showing the food premises location, waste storage, car parking, staff and public toilet facilities and adjacent land uses.
  
- Two (2) copies of a Floor Plan, drawn to scale not less than 1:50, showing details of the layout of all equipment, fixtures and fittings in a bird's eye view. Plans or supporting documentation must include:
  - Floor, wall and ceiling surface finishes, including colours
  - Bench surface finishes, including colours
  - Sink locations, dimensions, faucet design and proposed use (including hand wash basin/s, food preparation sink and wash up sink/s)
  - Location of floor wastes and/or cleaners sink
  - Light fitting design and installation
- Two (2) copies of Sectional Elevations of the fit out of the premise, drawn to a scale of not less than 1:50, showing a side-on view of the internal walls of the premises, indicating heights of equipment, fixtures and fittings.
- Two (2) copies of plans of the Mechanical Exhaust Ventilation system, drawn to a scale of not less than 1:50, showing the construction of the canopy and all ducting, including access points to ducting. If a Mechanical Exhaust Ventilation system is not installed, specifications of all cooking equipment are to be provided, to show that the total gas or energy input is below thresholds of the Australian Standards.
- Certification that the Mechanical exhaust system is designed in accordance with AS 1668.1 & 1668.2.



### Customer Signature

I/we hereby make application for Food Business Licence, and declare the information provided to be true and correct. I/we understand that should any information not be completed or attached, or relevant fees not received with application, this application may be considered not properly made, and returned without assessment.

|            |       |                   |
|------------|-------|-------------------|
| Signature: | Name: | Date:     /     / |
|------------|-------|-------------------|

Payment on this application is considered an invoice; ABN: 91 232 587 651. NO GST is applicable on Fees.



### Office Use Only

|                    |    |            |         |
|--------------------|----|------------|---------|
| Assessment number: |    | EH No.:    |         |
| Amount paid:       | \$ | Date paid: | /     / |
| Receipt number:    |    | Initials:  |         |

