

Application Form: Construct or Alter a Food Business

| Applicants Details | | | |
|--|---|--------------------------------------|--|
| Applicant Name: | | | |
| Mail Address: | | Street Address: | |
| | | Suburb: | Post Code: |
| Phone: | Mob: | Fax: | |
| Email: | | | |
| Food Business Details | | | |
| Name of Food Premises: | | | |
| Business Address: | | Street Address: | |
| | | Suburb: | Post Code: |
| Estimated Number of Equivalent Full Time Staff: | | | |
| Will the Premises be Connected to the Water Corporation Sewer? | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, please contact Water Corporation on 131395 to discuss requirements regarding connecting to sewer. If No, please contact Shire Health Services on (08) 9526 1111 to discuss on-site effluent disposal requirements. | | | |
| What Type of Food Business is Proposed: Please tick all boxes that apply (there may be more than one) | | | |
| Manufacturer/Processor | <input type="checkbox"/> | Hotel/Motel/Guesthouse | <input type="checkbox"/> |
| Retailer | <input type="checkbox"/> | Pub/Tavern | <input type="checkbox"/> |
| Food Service | <input type="checkbox"/> | Canteen/Kitchen | <input type="checkbox"/> |
| Distributor/Importer | <input type="checkbox"/> | Hospital/Nursing Home | <input type="checkbox"/> |
| Packer | <input type="checkbox"/> | Childcare Centre | <input type="checkbox"/> |
| Storage | <input type="checkbox"/> | Home Deliver | <input type="checkbox"/> |
| Transport | <input type="checkbox"/> | Temporary Food Premises | <input type="checkbox"/> |
| Restaurant/Café | <input type="checkbox"/> | Mobile Food Operator | <input type="checkbox"/> |
| Snack Bar/Takeaway | <input type="checkbox"/> | Market Stall | <input type="checkbox"/> |
| Caterer | <input type="checkbox"/> | Charitable or Community Organisation | <input type="checkbox"/> |
| Meals-on-Wheels | <input type="checkbox"/> | Other: | <input type="checkbox"/> |
| Will the Food Business Provide, Produce or Manufacture any of the Following Foods: Please tick all boxes that apply (there may be more than one) | | | |
| Prepared, Ready to Eat ¹ Table Meals | <input type="checkbox"/> | Confectionary | <input type="checkbox"/> |
| Frozen Meals | <input type="checkbox"/> | Infant or Baby Foods | <input type="checkbox"/> |
| Raw Meat, Poultry or Seafood (ie oysters) | <input type="checkbox"/> | Bread, Pastries or Cakes | <input type="checkbox"/> |
| Processed Meat, Poultry or Seafood | <input type="checkbox"/> | Egg or Egg Products | <input type="checkbox"/> |
| Fermented Meat Products | <input type="checkbox"/> | Dairy Products | <input type="checkbox"/> |
| Meat Pies, Sausage Rolls or Hot Dogs | <input type="checkbox"/> | Prepared Salads | <input type="checkbox"/> |
| Soft Drinks/Juices | <input type="checkbox"/> | Sandwiches or Rolls | <input type="checkbox"/> |
| Raw Fruit and Vegetables | <input type="checkbox"/> | Other: | <input type="checkbox"/> |
| Processed ² Fruit and Vegetables | <input type="checkbox"/> | | <input type="checkbox"/> |
| Notes: | 1. Ready to eat food – food that is ordinarily consumed in the same state as in which it is sold. | | |

Contact Us

Enquiries

Call: (08) 9526 1111

Fax: (08) 9525 5441

Email: info@sjshire.wa.gov.au

In Person

Shire of Serpentine Jarrahdale

6 Paterson Street, Mundijong WA 6123

Open Monday to Friday 8.30am-5pm (closed public holidays)



www.sjshire.wa.gov.au



**Application Form:
Construct or Alter a Food Business**

| | |
|--|---|
| | 2. Process – activity conducted to prepare food for sale; including chopping, cooking, drying, fermenting, heating, pasteurising or a combination of these. |
| In support of this application I hereby submit scaled plans and specifications including: | |
| The proposed floor plans, elevation plans and use of each room | |
| The structural finishes of every wall, floor and ceiling | |
| The position and type of every fitting and fixture | |
| If provided, number of chairs for patrons | |
| Details of proposed sinks for hand washing, food preparation and dish washing or dishwasher specifications | |
| All sanitary conveniences provided for staff and patrons, change rooms, storerooms, ventilating systems, drains, grease traps and provision for waste disposal | |
| Details of the mechanical exhaust system, if cooking is to take place in the food premises | |

If you do not include all required supporting information, assessment of your application may be delayed

Information to assist you on the fit-out requirements for your food premises may be found in the Safe Food Australia – A Guide to the Food Safety Standards on the Food Standards Australia New Zealand website, <http://www.foodstandards.gov.au> and/or the Australian Standard 4674: Fit out and Construction of Food Premises. This Australian Standard can be purchased from the SAI Global infostore website, <http://infostore.saiglobal.com>.

| | |
|---|----------|
| Application Fees | |
| Application for the construction of a food business | \$232.50 |

Declaration:

I, the person making this application declare that:

- This application form is accompanied by the fees required by the table above.
- I have attached all required plans and specifications.
- The information contained in this application is true and correct in every particular.

| | |
|--|-------|
| Signature of Applicant: In the case of a company, the signing officer must state position in the company. | Date: |
|--|-------|

Note: Should your Food Act 2008 application be approved, this does not remove the need to obtain all other necessary Planning and Building approvals prior to commencing work on your premises. Contact Statutory Planning Services or Building Services on 9526 1111 for further information on their requirements.

**Please note:**

Food Businesses require risk assessments that will incur a fee. Please refer to the below table.

Your food business risk rating will be determined when we complete our initial risk classification of your business.

| Food Business Risk Assessment Annual Inspection Fees | |
|---|----------|
| High Risk | \$540.00 |
| Medium Risk | \$390.00 |
| Low Risk | \$99.00 |
| Very Low Risk | \$52.00 |
| Pet Meat Premises | \$786.00 |

| To pay by credit card, complete the details below and send in with application | | | | | |
|--|---|----------|---|---------|--|
| Type of Card: | <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard | Card No: | | | |
| Name on Card: | | | Signature: | | |
| Expiry Date: | | CVV: | | Amount: | |
| Office Use: | Account Code HIA 218 | | Environmental Health (Licensing & Registration) | | |