

Notification of a Food Premises

Food Act 1984

Information for Food Businesses - Food Act Registration or Notification

The Food Act 1984 (the Act) regulates the sale of food for human consumption. A food premises classification system applies to all food premises operating in Victoria.

If your business sells food you must either register with, or notify, the council in which the premises is located. This information sheet explains whether you will need to **register** or **notify**.

Please note: You must attach this page to your application or notification to register, renew or transfer a food premises form.

Food Act Application for Registration or Notification

There are now four classes of food premises - class 1, class 2, class 3 and class 4. The new classification system means that regulatory requirements are better matched to the level of food safety risk associated with the food handling activities at different types of premises.

Class 1 has the highest and class 4 the lowest level of legal requirements. In summary, the new classes are:

- ☐ Class 1 - hospitals, child care centres and aged care services which serve high risk food.
- ☐ Class 2 - other premises that handle high risk food unpackaged food.
- ☐ Class 3 - premises that handle unpackaged low risk food or high risk pre-packaged food, and warehouses and distributors.
- ☐ Class 4 - as described below.

Classes 1, 2 and 3 premises must **register** with the council.

Class 4 premises must **notify** the council.

You will be a class 4 premises and only need to notify if your **only** food handling activities are as follows:

- ☐ the sale of shelf stable pre-packaged low risk food such as confectionery, crisps, frozen ice cream, milk, bottled drinks - for example, newsagents, pharmacies, video stores and some milk bars.
- ☐ the sale of packaged alcohol - for example, bottle shops.
- ☐ the sale of uncut fruit and vegetables - for example, farmers markets, green grocers and wholesalers.
- ☐ wine tasting (which can include serving low risk food or cheese).
- ☐ the sale of packaged cakes (excluding cream cakes).
- ☐ the supply of low risk food, including cut fruit, at sessional kindergarten or child care.
- ☐ simple sausage sizzles at stalls, where the sausages are cooked and served immediately. This means sausages, sauce, onions and bread. (This does not include hamburgers or other high risk foods).

For a full list of class 4 activities go to <http://www.health.vic.gov.au/foodsafety>

Please tick one of the following:

1. ☐ The only food handling activities at my premises are as described

Please complete a notification of a food premises form and submit to council for confirmation.

2. ☐ The food handling activities carried out at my food premises involve other activities that are not listed

If you ticked box 2, you may be required to register with the council.

Please contact the council to discuss:

- the process for registering your premises using the application to register a food premises form; and
- whether your premises is a class 1, 2 or 3. This will decide whether you require a food safety program and/or a food safety supervisor

If you operate a **supported residential service** you will need to inform the council whether the majority of your residents are aged persons.

Council will ask if you handle or intend to handle high risk foods. This means foods that require temperature control (refrigeration or heating). For example meats, chicken, fish smallgoods, custard, cream, salads, cooked pasta, eggs and sandwiches.

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IMPORTANT – This form is only applicable to Class 4 food premises. Please read the pre-application information section at the beginning of this form which describes Class 4 food handling activities. If there are any other food handling activities, contact Council as this may alter your food premises classification.

Proprietor details

Proprietor 1

Title

Surname

Given name(s)

If the proprietor is a company or association, specify name of person completing the application and authority (e.g. Directory of company)

Authority

Business name (and company if applicable)

e.g. Director of company

Proprietor 2

Title

Surname

Given name(s)

If the proprietor is a company or association, specify name of person completing the application and authority (e.g. Directory of company)

Authority

Business name (and company if applicable)

e.g. Director of company

Street address / Postal address

Suburb / Town

State

Postcode

Please provide at least one phone number and include the area code

Business phone

Home phone

Business fax

Mobile

Email

Premises details

Trading Name

Premises address

Street address / Postal address

Suburb / Town

State

Postcode

Please provide at least one phone number and include the area code

Business phone

Home phone

Business fax

Mobile

Email

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Contact person at premises (if not the proprietor)

Title Surname Given name(s)

Suburb / Town State Postcode

Please provide at least one phone number and include the area code

Business phone Home phone Business fax Mobile

Email

Food vehicle details (if applicable)

Registration Number Make Model

At what address is the vehicle garaged when not in use?

Street address / Postal address

Suburb / Town State Postcode

Food Related Details

Type of food handling activity (choose from the list below)

A food premises at which the only food handling activities are one or more of the following:

the sale to members of the public of Pre-packaged low risk food such as confectionery, crisps, frozen ice cream, milk, bottled drinks. For example, newsagents, pharmacies, video stores and some milk bars;

a wine tasting for members of the public, which may include the serving of cheese or low risk food that has been prepared and is ready to eat; or

the sale to members of the public or the wholesale of whole (uncut) fruit or vegetables; or

the handling of low risk food or cut fruit or vegetables and the serving of that food to children at a sessional children's service.

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Additional details

Q1 Do you sell Tobacco ? YES ☐ NO ☐

If YES, Is it sold from a Vending Machine that can be accessed by the public YES ☐ NO ☐

Q2 What are your Trading Hours?

Monday	<input type="text"/>	Tuesday	<input type="text"/>	Wednesday	<input type="text"/>
Thursday	<input type="text"/>	Friday	<input type="text"/>	Saturday	<input type="text"/>
Sunday	<input type="text"/>	Other	<input type="text"/>		

Declaration

I understand and acknowledge that:

- The information provided in this notification is true and complete to the best of my knowledge
- This application forms a legal document and penalties exist for providing false or misleading information
- If the business is owned by a sole trader or a partnership, the proprietor(s) must sign and print name
- If the business is owned by a company or association - the applicant on behalf of that body must sign and print their name

Applicant signature

Applicant signature

Print applicant name

Print applicant name

Date

Date

Office Use Date received: _____

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Privacy statement

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