

Application for Food Safety Programme Accreditation

Food Act 2006
Section 102



ABN: 95399253048
Telephone: 07 4913 5000 / 1300 790 919
Postal: PO Box 2292 YEPPOON QUEENSLAND 4703

Enquiries: www.livingstone.qld.gov.au/OnlineServices



PRIVACY NOTICE Livingstone Shire Council is collecting your personal information in order to provide the requested service and to update Council's records. The collection of this information is required under the Food Act 2006.

This form must be used when applying for accreditation of a Food Safety Programme for a business undertaken by the applicant, who has an existing Food Business Licence. The details provided are used by Council to decide the application. The application must be submitted with the relevant fee, the food safety programme and written advice from an approved Food Safety Auditor.

Applicant Details

Applicant Name (Individual, Partnership, Company)	Manager(s) Name
<input type="text"/>	<input type="text"/>
Postal Address	Contact Number(s)
<input type="text"/>	<input type="text"/>
Suburb and Postcode	Email
<input type="text"/>	<input type="text"/>

Current Licence Details

Licence Number	Fixed / Mobile Premise Details
<input type="text"/>	<input type="text"/>
Trading Name	Suburb and Postcode
<input type="text"/>	<input type="text"/>

Food Safety Programme

Business Type

<input type="checkbox"/> Offsite Catering	<input type="checkbox"/> Child Care Centre
<input type="checkbox"/> Onsite Catering	<input type="checkbox"/> Aged Care Facility
<input type="checkbox"/> Private Hospital	<input type="checkbox"/> Other (please specify)

Livingstone Shire Council requires the applicant to obtain a 'Notice of Written Advice' from an approved auditor as to whether the food safety programme meets the criteria for food safety programmes set out in section 104 of the *Food Act 2006*. Visit the Queensland Health website <https://www.health.qld.gov.au/public-health/industry-environment/food-safety/programs> for approved Food Safety Auditors.

Checklist

The following is required to be submitted with this application. Use this checklist to ensure that you have attached all necessary documents for Council to assess and decide the application.

Food Safety Programme

- Two (2) copies of the Food Safety Programme
- 'Notice of Written Advice' from an approved Food Safety Auditor

OFFICE USE ONLY

Receipt No.	Amount Paid \$	Date Paid ___/___/___	CSR No:
Information Checked: Yes / No	Licence No:	Doc No:	Initials:

File LE19.4.3 –Licensing Food Business – 19.6.4 – 3 years (after the refusal, expiry or cancellation of the licence)

Application for Food Safety Program Accreditation Form February 2014 (Version 1.1)

Declaration

I submit this Application for Food Safety Programme Accreditation with the relevant fee and supporting documentation as required. I understand that it is an offence under section 267 and section 268 of the *Food Act 2006* to provide false or misleading information or documents. If the application is made by a corporation or incorporated association, the person signing the form must occupy a position which is legally entitled to make an application on behalf of the corporation or incorporated association.

Signature of Applicant

Date

Name of Applicant (Individual, Partnership, Company)

Name of Signatory (if Partnership or Company)

Position of Signatory (if Partnership or Company)

Payment Options

Refer to Council's Current [Fees and Charges](#) for details

Payment must be made when the form is submitted – forms will not be processed until payment is received.



MAIL – Make your cheque/money order payable to Livingstone Shire Council and mail to PO Box 2292, Yeppoon QLD 4703



IN PERSON – You can pay this account at any of Council's Customer Service Centres:



ONLINE SERVICES – Visit www.livingstone.qld.gov.au/online-services

Yeppoon (Town Hall, 25 Normanby Street or Emu Park (Library), 7-9 Hill Street