

Food Premises

Application for renewal of registration only

Food Act 1984

I/we the undersigned hereby apply to renew the registration of the premises hereunder described:

Premises trading name		
Premises trading address		
Premises contact details	Phone:	Mobile
	Email:	
Name of proprietor		
Postal address		
Proprietor contact details	Phone:	Mobile:
	Email:	

Type of food premises	
Classification of Premises	
Food Safety Program	
Name of Food Safety Supervisor (Class 1 and 2 only)	

Signature of proprietor:	Signature of proprietor:
Print name:	Print name:
Date:	Date:

OFFICE USE		
Fee payable:\$	Registration No.:	
Receipt No:	Date paid:	Amount paid:
Conditions of registration:		