

TAX INVOICE LIC005

# APPLICATION FOR A LICENCE FOR FOOD PREPARATION & SERVICE TO VULNERABLE POPULATIONS Food Regulation 2015

Licensing unit office hours: 9.30am – 4.30pm Monday – Friday Phone: 02 6552 3000 or 1300 552 406 NSW Food Authority **ABN 47 080 404 416** PO Box 232 TAREE NSW 2430

Did you know ... if you are applying to licence a business and do not hold a current NSW Food Authority licence, you can now lodge your application online by going to the online application form link at <a href="https://www.foodauthority.nsw.gov.au">www.foodauthority.nsw.gov.au</a> (Please note: conditions apply for use of online applications).

Use the 'Guide to help businesses apply for a licence under the Vulnerable Populations Food Safety Scheme (Food Regulation 2015) found at: <a href="https://www.foodauthority.nsw.gov.au/media/866">https://www.foodauthority.nsw.gov.au/media/866</a> for assistance to complete this application.

## **APPLICANT DETAILS**

- Complete Section A(i) for sole trader/ partnership details
- Complete Section A(ii) for company/ trust/ association details

SECTION A (i	SECTION A (i): SOLE TRADER/ PARTNERSHIP BUSINESS STRUCTURE (please tick appropriate box)  Sole Trader  Partnership										
LAST NAME							FIRST NAME				
LAST NAME							FIRST NAME				
LAST NAME							FIRST NAME				
LAST NAME							FIRST NAME				
<b>TRADING NAM</b> copy of Business 28/5/2012) or A	s Name C	Certifica	ite issued e	either by			, please provide if before	Ø			
ABN											
POSTAL ADDR	ESS										
SUBURB/ TOV	<b>VN</b>						STATE			POSTCODE	
PHONE		(	)				FAX	(	)		
MOBILE							EMAIL				
AUTHORISED	CONTA	CT DE	TAILS (if	differe	nt to i	nformatio	n provided abov	e eg N	1anager,	, QA, Admin,	etc)
Mr	Mrs		Miss		1s	Dr	Professor		Other		
NAME											
POSITION											
PHONE							FAX				
MOBILE							EMAIL				
DO YOU HAVE	AN EX	STIN	G NSW F	OOD AU	THOR	ITY LICEN	ICE?				
NO	VEC	- plos	aco aivo de	staile (oc	Licono	a number	or customer no )				

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SECTION A (ii): COMPANY/ TRUST/ ASSOCIATION BU	SINESS STRUCTU	JRE (please tick appropriate	box)
Company Trust Association	Other		
COMPANY NAME(if applicable) If a company, please provide a copy of full ASIC Company Statement (showing names of public officers/ directors)	)		
ACN			
CONSENT TO CONDUCT COMPANY SEARCH ON BEHALF OF	•	la de la companya de	at to the NCW Food
If it is not possible for supporting documents to be provided during Authority, to conduct a company search on their behalf.			it to the NSW Food
Failure to supply supporting documents may result in delays in proc		_	
I/We, the applicant/s conducting the food business for w representative to conduct a company search on our behalf		ng submitted, give consent for a l	NSW Food Authority
I/We agree to pay the fees applicable to this service, as	per the fee schedule	enclosed in this application.	
<b>TRUST NAME (if applicable):</b> If a trust, please provide name(s) nominated person(s) to receive correspondence	of		
<b>ASSOCIATION NAME (if applicable):</b> If an association, please provide a copy of the Certificate of Incorporation.			
ABN			
<b>TRADING NAME (if applicable):</b> If operating under a trading na please provide copy of Business Name Certificate issued either by F Trading NSW (if before 28/5/2012) or ASIC (if registered after 28/5/2012).	air //		
POSTAL ADDRESS			
SUBURB/ TOWN	STATE	POSTCODE	
PHONE ( )	FAX	( )	
MOBILE	EMAIL		
AUTHORISED CONTACT DETAILS			
Mr Mrs Miss Ms	Dr Pr	ofessor Other	
NAME			
POSITION			
PHONE		FAX	
MOBILE		EMAIL	
DO YOU HAVE AN EXISTING NSW FOOD AUTHORITY LI	CENCE?		
NO YES – please give details (eg Licence numb	er or customer no.)	)	

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Is the business under this application being taken over from an existing licence holder?						
NO – Please proceed to communication section below	٧.					
<b>YES</b> – If possible, please arrange for the previous ow	YES – If possible, please arrange for the previous owner to complete the 'Consent of Present Licensee' section below:					
CONSENT OF PRESENT LICENSEE(S) (if applicable	e)					
<ul> <li>I/we hereby certify that I am authorised to submit this in</li> <li>If a company, show capacity of person signing</li> </ul>	<ul> <li>I/we hereby certify that I am authorised to submit this form on behalf of this business.</li> <li>If a company, show capacity of person signing</li> </ul>					
I/We, the current licensee(s), will/will not continue to condu	ct a food business using the premises	and agree/o	do not agree to the	cancellation of		
the licence for the premises. My/Our licence number is						
SIGNATURE(S) $\mathcal{X}$		DATE	/	1		

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# **BUSINESS ACTIVITY DETAILS**

is the b	usiness relocating from an existi	ng site?			
	NO – Please proceed to business a	ctivity and location section	below.		
	<b>YES</b> – Please confirm existing site a	ddress and then proceed t	business activity details an	d location sect	ions below:
	LOCATION OF EXISTING SITE				
SECTIO	N B – FACILITY DETAILS				
				♦ Se	ee guide page 10
1. H	low many facilities does tl	ao business listed	in Section A own or		
	o Standard 3.3.1?	ie busiliess listeu	iii Section A own or	operate t	nat are subject
	e is more than one facility, you monopying and attaching these section			each corresp	onding facility by
priotoc	opying and attaching these section	ons to the licence appli	Cation Torm.		
2. F	Facility details			♦ Se	ee guide page 10
	-				
and/o	of facility where processing r serving of food is being cted (if applicable):				
proces	ss of facility where ssing and/or serving of food good conducted:				
	.9 00.1140.001	SUBURB:	STAT	E:	P/CODE:
	nated commencement of g date				
as Cor	y owner name (if applying ntractor to facility provide				
	of facility owner): y phone number:				
	-				
Facilit	y fax number:				
Conta	ct person:				
Position	on:				
Conta	ct person phone number:				
Conta	ct person fax number:				
Conta	ct person mobile number:				
Email	address:				

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# **SECTION C – ACTIVITY DETAILS**

	♦ See guide page 10–12
3.	Which activity do you conduct at this facility?
Pleas	se tick relevant box:
a)	ACTIVITY 1  Process or serve potentially hazardous food within a facility listed and defined in the schedule to six or more vulnerable persons at any given time.   So to question 4
b)	ACTIVITY 2  The principal activity is processing food into ready-to-eat food for service in a facility listed and defined in the schedule and the processed food:  (i) is for service to six or more vulnerable persons at any given time; and  (ii) includes ready-to-eat potentially hazardous food.  D > Go to question 7
	□ > do to question 7
c)	ACTIVITY 3  The principal activity is <u>processing food into ready-to-eat food for delivery</u> by a delivered meal organisation and the processed food:  (i) is for service to six or more vulnerable persons at any given time; and  (ii) includes ready-to-eat potentially hazardous food.
	□ > Go to question 7
d)	ACTIVITY 4  The business is <u>a delivered meal organisation that processes food for service</u> to clients and the processed food:  (i) is for service to six or more vulnerable persons at any given time; and  (ii) includes ready-to-eat potentially hazardous food.   Go to question 7

# **SECTION D - FACILITY TYPE**

4.	If y	See guide pages 12-14 ou are conducting Activity 1, what type of facility are you processing and/or serving
	foo	in?
Pleas	se tick	relevant box
ā	ı) <b></b>	Acute care hospital
ŀ	) <b></b>	Psychiatric hospital
C	:) <b></b>	Hospice
C	i) [	Nursing home for the aged
€	e) 🗆	Same-day care establishments for chemotherapy and renal dialysis
f	) [	Respite care establishments for the aged
g	ı) <b></b>	Same-day, aged-care establishment
ŀ	ı) <b></b>	Low-care, aged-care establishment
ij	) [	Multi-purpose service

# **SECTION E - CONTRACTUAL RELATIONSHIP**

			♦ See guide page 14
5.	Whicl	h bes	st describes your use of a contractor?
	facility	ident	ntractor means a business that is contracted to perform work (eg food processing/serving) within a ified within Standard 3.3.1. It does not mean an external provider (such as a CPU) that a facility als from.
Please	e tick re	elevar	nt box
a)		nduct I serv	t all food processing and/or serving and we <u>do not use a contractor</u> for any part of our rice
		> Go	to question 7
b)	I use	e a co	ontractor for all or part of our food service
	1)		I contract all my processing and serving of food within the facility to a contractor
	2)		I process the food; serving of food is conducted by my contractor within the facility
	3)		I serve the food; processing of food is conducted by my contractor within the facility
	□ :	> Go	to question 6
c)	Iam	the	contractor conducting activity 1 (contractor within an identified facility)
	1)		I am the contractor and I conduct all the processing and serving of food within the facility
	2)		I am the contractor and I process the food; serving of food is conducted by the facility's staff within the facility
	3)		I am the contractor and I serve the food; processing of food is conducted by the facility's staff within the facility
	□ :	> Go	to question 7
d)	Othe	er – F	Please describe here

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# **SECTION F - CONTRACTOR'S DETAILS**

	♦ See guide page 15
6. What are the contractor's d	etails?
Contractor's business name:	
Contact person:	
Position:	
NSW Food Authority licence number (if known):	
Phone number:	
Fax number:	
Mobile number:	
Email address:	

# SECTION G – FULL TIME EQUIVALENT (FTE) FOOD HANDLERS

	♦ See guide page 15 low many full time equivalent (FTE) food handlers are involved in processing and/ or erving potentially hazardous food within the facility identified in Section B, Question 2?
Please	tick relevant box
a)	O-3 FTE food handlers
b)	4-10 FTE food handlers
c)	☐ 11-30 FTE food handlers
d)	☐ 31-50 FTE food handlers
e)	51+ FTE food handlers
Note: I	TE staff only applies to paid staff
	YOU ARE NOW FINISHED. PLEASE PROCEED TO SECTION H – PAYMENT DETAILS.

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NB: For a definition on how to determine the full time equivalent (FTE) food handlers please refer to Section C – Activity details: Question 4 on the application guide.

#### **FEE SCHEDULE**

No. of full time equivalent (FTE) food handlers	Licence fee		No. of facilities to be licensed	Total lic	cence fee
0 (Facilities that do not process or serve)	NIL	x			NIL
0-3	\$360.00	х			
4-10	\$460.00	х			
11-30	\$850.00	х			
31-50	\$1,235.00	х			
51+	\$1,625.00	х			
Additional chargeable items	No. of packs	Total cost			
Company search administration fee	N/A				\$50.00
			APPLICATI	ON FEE	\$50.00
			TOTAL FEE PA	YABLE	

#### **DECLARATION**

I/we hereby ce	<ul> <li>SIGNATURE(S) OF ALL APPLICANT(S) – Please sign below with name clearly printed underneath</li> <li>I/we hereby certify that all information provided on this form is true and correct.</li> <li>I/we hereby certify that I am authorised to submit this form on behalf of this business.</li> </ul>				
SIGNATURE(S)	X				
PRINT NAME(S)		DATE		1	/
POSITION WITHIN ORGANISATION					

#### Please note:

- In addition to the licence fee, there is a one-off \$50.00 licence application fee. This fee covers the cost of processing the licence.
- Also in addition to fees mentioned previously is the company search administration fee. This covers the cost of
  performing the company search for ASIC company documents (if applicable) in the case where an application has
  been submitted under a company name but no supporting documents have been supplied by the applicant.
- If there is more than one facility that needs to be licensed you must add the licence fee for all facilities together to settle the fee. One licence will be issued to the business indicated in Section A with licence extracts issued for the corresponding facilities. Licence extracts should be forwarded to each facility and displayed in an appropriate manner.
- If the facility being licensed does not perform any processing or service of food to vulnerable populations, then the licence fee will be waived and only the application fee \$50.00 is payable.
- If adding an additional facility to an existing licence please forward payment for the \$50.00 Application fee and a pro-rata invoice for the licence fee will be forwarded to you for payment.
- Prior to the approval of a licence, a licensing assessment will be carried out to ensure compliance with the Food Standards Code and Food Regulation 2015. If the result of the assessment is unacceptable, the licence may not be approved and the licence application may be rejected. It is highly recommended the applicant refer to the Authority's website for information relating to the assessment process and industry sector requirements.

# **Processing times**

The Authority will review your application within **10 working days** of receiving your licence application and you will be notified if any further information is required. If your application is complete the Authority will write to you to let you know your licence application has been processed and provide you with a time frame for completion of the licensing assessment that is required.

#### **PAYMENT METHODS**

# A. PAYMENT BY CHEQUE OR MONEY ORDER

Please mail money order or cheque (crossed 'Not negotiable' and made out to NSW Food Authority) along with completed application form to PO Box 232, Taree NSW 2430

#### **B. PAYMENT BY CREDIT CARD**

A 0.4% merc	nant surcharge w	ll occur on credit	card transactions	for MasterCar	d and Visa card
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Please debit my:		MasterCard		Visa card
Card number:			. <b></b>	
Cardholder's name:			. <b></b>	
CVV number: (the final three digits of t	the	number printed on th	e si	
Expiry date:			. <b></b>	
Payment amount:				
Cardholder's signature:				

## C. PAYMENT BY BPAY®, INTERNET BANKING OR TELEPHONE

If you wish to make payment by any of the above methods, please submit your completed application form without payment to the Licensing Unit by:

- Post to PO Box 232, Taree NSW 2430, or
- Email to bfs.admin@dpi.nsw.gov.au

An invoice will then be forwarded to you for payment.

Please note: we do not accept American Express.

# **CHECKLIST**

To avoid any delays in the processing of your application, please ensure all relevant documentation is submitted with this application form.

- Y Application form completed and signed
- Y ASIC Company Statement showing the name/s of the Director/s attached (where applicable)
- Certificate of Registration of business name attached (where applicable) issued either by Fair Trading NSW (if registered before 28/5/2012) or ASIC (if registered after 28/5/2012)
- Y Certificate of Incorporation attached (where applicable)
- Y Payment attached

Please return all pages of your Food Authority licence application to:

NSW Food Authority PO Box 232 TAREE NSW 2430

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