



Notification of a Food Premises

Food Act 1984

Warrnambool City Council

(03) 5559 4800

www.warrnambool.vic.gov.au

Questions marked with an asterisk (*) are mandatory and must be completed.

Council specific information

The information on this form is only used by Council for and will not be disclosed unless required under law.

IMPORTANT – This form is only applicable to Class 4 food premises. Please consult with Council's Health Unit to determine whether your business falls within a Class 4 Classification.

Proprietor Details

Proprietor (If the proprietor is a partnership rather than sole ownership, both names should be listed. If the proprietor is a company or an organisation, the company name should be listed).

Is this proprietor a contact for this application? Yes No

Title * Surname * Given Name(s)*

Proprietor 2 (if applicable)

Title * Surname * Given Name(s)*

Company Name (if applicable)

Company ABN Company ACN

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

Premises Details

Trading name of premises *

Premises Address

Street address / postal address *

Suburb / Town * State * Postcode *

Contact Person at Premises (if different from proprietor)

Title * Surname * Given Name(s)*

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

Business phone Home phone Business fax Mobile

Email

Food Handling Activities

What food handling activities will be undertaken at your premises?

Payment Details

There is no fee for this notification

Lodgement

Return form to:

Environmental Health
Warrnambool City Council Telephone (03) 5559 4800
PO Box 198 Fax (03) 5559 4900
Warrnambool VIC 3280 Website: Warrnambool.vic.gov.au

Declaration

I understand and acknowledge that:

- The information provided in this application 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
- I am over 18 years at the time of completing this application

If the business is owned by a sole trader or partnership, the proprietor(s) must sign and print name(s)

If the business is owned by a company or association – the applicant on behalf of that body must sign and print their name.

Signature
Print Name
Date

Signature
Print Name
Date