



Kentish Council  
69 High Street (PO Box 63) SHEFFIELD TAS 7306  
PH 6491 0200 FAX 6491 1659

Food Act 2003  
Sections 87, 88 & 89

## Mobile Food Business

### Application for Registration/Renewal of a Mobile Food Business

#### PART 1: TYPE OF APPLICATION

(tick one box only)

- I am applying for Annual State Wide Registration; or
- I am applying for a 'one off' or event specific Registration (*single or multi-day event*)  
Date(s) of event for one off registration: ...../...../..... to ...../...../.....; or
- I am applying for registration for ..... months (must be less than 12 months)

[Note: Council may choose to approve registration for a period different to the duration specified above]

#### PART 2: APPLICANT & MOBILE FOOD BUSINESS DETAILS

Title	Given Name/s	Family Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Company Name		
<input type="text"/>		
ABN / ACN	Date of Birth (for non-ABN/ACN holders)	
<input type="text"/>	<input type="text"/>	
Business Address (must be located within the boundaries of this Council for registration to be valid)		
<input type="text"/>		
Postal Address (if different from business address)		
<input type="text"/>		
Business Phone Number	Mobile Number	
<input type="text"/>	<input type="text"/>	
Email Address		
<input type="text"/>		
On-site Contact (if different from applicant)	Phone number	Mobile Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address (on-site contact)		
<input type="text"/>		

#### PART 3: MOBILE FOOD BUSINESS DESCRIPTION

Trading Name and / or Stall/Van Name	
<input type="text"/>	
Type of Mobile Structure (van, tent, marquee, caravan, etc.)	Vehicle Registration No. (if applicable)
<input type="text"/>	<input type="text"/>

#### PART 4: MOBILE FOOD BUSINESS LAYOUT

Please attach an A4 plan or photographs clearly depicting the layout of your mobile food business as part of this application. Refer to the *Guidelines for Mobile Food Businesses* for more information.

**PART 5: TYPES OF FOOD TO BE SOLD**

List the types of food to be sold

**PART 6: FOOD SAFETY SKILLS AND KNOWLEDGE**

(food safety qualifications, training or experience of applicant/owner – attach details if insufficient space)

**PART 7: FOOD PREPARATION & STORAGE**

If any food sold from the mobile food business is to be prepared and/or stored at another location, please provide details, including the address of any premises where food is to be stored or prepared. Attach details if insufficient space:

**PART 8: APPLICANT DECLARATION**

I declare that the information provided on this form is accurate, complete and correct.

I understand and agree that information about this application and the businesses' on-going operations will be shared with councils and the Department of Health and Human Services to assess this application and the businesses' compliance with the *Food Act 2003*.

I understand that this is an application, and approval of this application is not guaranteed.

Applicant Name

Applicant Signature

Date

...../...../.....

Office Use Only - REEH INST 68035

Receipt Number ..... Date.....

Amount Paid \$.....

Approved EHO.....

Registration Issued .....