

# Application for Amendment of Food Business Licence

Food Act 2006  
Section 74



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

**Enquiries:** [www.livingstone.qld.gov.au/OnlineServices](http://www.livingstone.qld.gov.au/OnlineServices)



Did you know you can [apply online?](#)

**PRIVACY NOTICE** Livingstone Shire Council is collecting your personal information in order to provide the required 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 an amendment to a Food Business Licence for a food business undertaken by the applicant. The details provided are used by Council to decide the application. The application must be submitted with the relevant fee and the current Food Business Licence.

## Current Licence Details

Licence Number

Trading Name

Premises Location

Licensee Name

Suburb and Postcode

Licence Type

Fixed Premises

Mobile Premises

## Purpose of Amendment (various fees apply)

Amendment of Licence details such as trading name, address, food safety supervisor complete sections **A and B**

Amendment of Licensee (new operator/owner) complete sections **A, B, D, E, F and G**

Minor fit out and/or change to food preparation area < twenty (20) per cent complete sections **C, D and E**

Major fit out and/or change to food preparation area >twenty (20) per cent complete sections **C, D and E**

Amendment of premises location (relocation) complete sections **C, D and E**

## Section A - Change to Licensee Details (please provide new details)

Proposed Licensee Name (Individual, Partnership, Company)

Company Name (if Partnership or Company)

Postal Address

Nominated Office Address (if Partnership or Company)

Suburb and Postcode

Suburb and Postcode

Contact Number(s)

Company Director(s) Name

Email

Manager(s) Name

## 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 Amendment of Food Business Licence Form March 2018 (Version 1.3)

**Section A (continued) - Change to Licensee Details (please provide new details)**

ABN / ACN

Manager(s) Contact Number

Proposed Trading Name

Description of Proposed Business  
(caterer, bakery, takeaway, café, restaurant, hospital)

Settlement Date / Handover Date

**Section B - Food Safety Supervisor**

If the details of any new Food Safety Supervisor(s) are unknown at the time of application, please do not complete this section. This will not affect the processing of your application. However, you must provide the contact details of the new Food Safety Supervisor(s) and a copy of the Statement of Attainment for the relevant qualification within thirty (30) days of receiving the Food Business Licence.

Does the Food Safety Supervisor(s) have the authority to supervise and give directions about matters relating to food safety to persons who handle food in the food business?  Yes  No

Is the Food Safety Supervisor(s) reasonably available to be contacted by Council while the food business is being conducted?  Yes  No

Food Safety Supervisor Name

Food Safety Supervisor Name

Postal Address

Postal Address

Suburb and Postcode

Suburb and Postcode

Contact Number(s)

Contact Number(s)

Email

Email

**Section C - Change to Premises Details (please provide new details)**

- Minor fit out and/or change to food preparation area < twenty (20) per cent
- Major fit out and/or change to food preparation area > twenty (20) per cent

Brief Description of Proposed Changes

Do you have current approvals?

Yes  No

Development Approval Number

Plumbing and Drainage Approval Number

## Section C (continued)- Change to Premise Details (please provide new details)

Building Approval Number

Other Approvals

### Relocation of fixed premises (please provide new details)

Premises Address

Lot and Plan Number

Suburb and Postcode

Floor Area (square meters)

### Relocation to new mobile premises (please provide new details)

Premises Address (where mobile premises can be inspected)

Vehicle Registration Number (if applicable)

Suburb and Postcode

Registered Vehicle Owner

Floor Area (square meters)

Vehicle Make

Vehicle Type (car, van, trailer, caravan)

Vehicle Model

## Section D - Checklist

The following must 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.

### Change to Licensee Details

- Current Food Business Licence (original copy) (mandatory)
- Copy of the Statement of Attainment

### Minor / Major Fit Out or Change to Food Preparation Area OR Relocation of Fixed Premises OR Relocation to New Mobile Premises

- Current Food Business Licence (original copy) (mandatory for relocation of premise only)
- Detailed food menu and list of potentially hazardous ingredients
- Details on the materials used in the design and construction of the premises/vehicle
- Two (2) copies of each plans, drawn to scale and complying with the Food Safety Standards 3.2.3:
  - Site Plan
  - Floor Plan
  - Sectional Elevations Plan
  - Hydraulic Plan
  - Mechanical Exhaust Ventilation Plan
  - Transport Vehicle
  - Premise Layout detailing:
    - Details, position and size of all plumbing fixtures, food preparation benches and exhaust canopies.
    - Details of all surface finishes (floors, walls, ceilings and bench surfaces) and surface joining methods.
    - Details, position and specifications of all food preparation equipment

## Section E - Declaration (current licensee to complete)

I submit this Application for Amendment of Food Business Licence 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)

## Section F - Applicant Suitability (proposed licensee to complete)

- (a) Has the applicant (proposed licensee), executive officer, or any other member of the management committee been convicted of a relevant offence other than a spent conviction?  Yes  No
- (b) Has the applicant (proposed licensee), executive officer, or any member of the management committee previously held a licence under the *Food Act 2006*, *Food Act 1981* or a corresponding law and that licence was cancelled or suspended?  Yes  No
- (c) Has the applicant (proposed licensee), executive officer, or any member of the management committee been refused a licence under the *Food Act 2006*, *Food Act 1981* or a corresponding law?  Yes  No

If you have ticked 'Yes' for one or more of the boxes above, please provide details and submit with your application. Is further information attached?  Yes  No

## Section G - Declaration (proposed licensee to complete)

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 Proposed Licensee Signature

Date

Name of Proposed Licensee (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/onlineservices](http://www.livingstone.qld.gov.au/onlineservices)

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