

NOMINATION OR AMENDMENT OF FOOD SAFETY SUPERVISOR	
<i>Food Act 2006</i>	
Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.	
Conditions may be imposed on the permit as considered appropriate by Council	
This form is to be used when nominating or amending a Food Safety Supervisor for a business carried on by the applicant, who has a current Food Business Licence.	
Nomination or Amendment	No fee applies
BUSINESS DETAILS Details of the Food Business that is applying for a nomination or amendment of a Food Safety Supervisor/s	
Business name	
Contact person	
Residential address	
Locality / Suburb	State Postcode
Postal address	
Locality / Suburb	State Postcode
Phone Number	Mobile Number
Fax Number	Email
<i>I consent to the making of this application for a nomination or amendment of the Food Business Licence's Food Safety Supervisor/s</i>	
Signature	Date / /
FOOD SAFETY SUPERVISOR/S Under the <i>Food Act 2006</i> , all licenced food businesses must have a Food Safety Supervisor/s. The licensee is required to provide the details of the Food Safety Supervisor/s within 30 days of receiving the Food Business Licence. The licensee must also advise Council of any changes to the Food Safety Supervisor/s including changes to their contact details or when the person is no longer a Food Safety Supervisor within 14 days of the change. A copy of the Statement of Attainment for the relevant qualification must also be attached, if a new Food Safety Supervisor/s is nominated.	
Applicant One	<input type="checkbox"/> Nomination <input type="checkbox"/> Amendment <input type="checkbox"/> Cancellation
Food Safety Supervisor Name	
Postal Address	
Locality / Suburb	State Postcode
Phone Number	Mobile Number
Fax Number	Email
Applicant Two	<input type="checkbox"/> Nomination <input type="checkbox"/> Amendment <input type="checkbox"/> Cancellation
Food Safety Supervisor Name	
Postal address	
Locality / Suburb	State Postcode
Phone Number	Mobile Number
Fax Number	
Email	
CHECKLIST	
An application for a nomination or amendment of Food Safety Supervisor must include:	
<input type="checkbox"/>	A Copy of the Statement of Attainment/s attached for each corresponding nominated Food Safety Supervisor(s)

DECLARATION	<i>I declare the information provided in this application to be true and correct.</i>	
	Signature	Date / /
APPLICANT ONE		
APPLICANT TWO	<i>I declare the information provided in this application to be true and correct.</i>	
	Signature	Date / /
Please note: This application form must be completed and signed and lodged with Council along with the prescribed fee		
OFFICE USE ONLY	Date Received:	Application Checked: YES NO
	Subject: FID2666	Taken By:
		Other:
<p>Banana Shire Council is collecting your personal information to process your application. The information will not be disclosed to any other person or agency external to council without your consent, unless required by or authorised by law. Personal information will be handled in accordance with the <i>Information Privacy Act 2009</i></p>		