

New Premises Enquiry – Food Premises

Thank you for your initial enquiry regarding a food business within the City of Whitehorse. To assist you in understanding the requirements to register a premises visit Council's website at <u>www.whitehorse.vic.gov.au/living-working/business</u>

| Premises Details: | | | | | | | | | | | | |
|--|--|---------------------------|------------------------------|-------|----------------------|-------------------|-------------|--|---|----------------------------|--|--|
| Trading Name (if known): | | | | | | | | | | | | |
| Premises Address: | | Su | Suburb | | | Postcode | | | | | | |
| Postal Address: (If o | different | to above) | | | | Sı | Suburb | | | Postcode | | |
| New Premises - Business with no current Food Registration within Council | | | | | | | | | | | | |
| Is this a new premis **All new premises planning and buildir | □ Yes *It is recommended a Pre- Registration Plans Assessment be completed– please refer to fee schedule Do you want to proceed with a Plans Assessment? □ N □ Yes □ No | | | | | | □ No | | | | | |
| Existing Premises - Business with current Food Registration within Council or within last 6 months & change of business ownership | | | | | | | | | | | | |
| Is this an existing pr | | ? | □ Yes □ No | | | | | | | | | |
| If purchasing the bu settlement date? | siness, | what is the | | | | | | t date of trading? gistered prior to this | date | | | |
| If purchasing the bu a Pre Sale Inspection | □ Yes * Pre - Sale Fees payable – please refer to fee schedule | | | | | | D No | | | | | |
| Will you be making plan and require pla | Yes * Fees payable for alterations – please refer to fee schedule **All alterations may be subject to planning and building approval | | | | | | oval | □ No | | | | |
| Type of Premis | es: | | | | | | | 0 0 11 | | | | |
| Accommodation Getaway Aged Ca | | | are Facility Dake Retaile | |] Bakery Retailer | 🗆 Ba | | nr/Pub | | Café/Restaurant | | |
| Canteen/Camps Catering | | | 9 | Γ | Childcare | | | J - 1 | | Club | | |
| Coffee and Dessert | | | ience Store | es 🗆 | Delicates | licatessen Orga | | elivered Meals nisation | _ | Green Grocer | | |
| □ Home Based Retailer □ Hospita | | | | |] Juice Bar | • • • • • • • • • | | □ Low Risk Packaged Food Retailer | | Manufacturer – Low Risk | | |
| □ Manufacturer – Hazardous Foods □ Mobile | | | ood premi | 292 | I Nuts/Herbs | | D Re | □ Reception Centre | | □ Residential Care | | |
| | | □ Take Av /Fast food o | | | | | bacco/E Dis | | Varehouse/ tributor/Wholesalers I Importers | | | |
| Proprietor Deta | ils: (le | gal entity – car | nnot be a t | rust) | | | | | | | | |
| | □Indi | vidual - | Name | | | | | | ABN | 1 | | |
| Proprietor Type: (please tick) | □Company | | Name | | | | | ABN | ACN | | | |
| | □Par | tnership | Name 1 | | | | | Name 2 | | | | |
| | □Tru | stee | Trustee Name: | | | | ABN | | | | | |
| Email | | | Mobile | | | | | | | | | |
| Applicants Details | | | | | | | | | | | | |
| Applicants Name | | | | | | | | | | | | |
| Applicant's involvement: □ Owner □ Builder □ Occupier □ Occupier □ Architect □ Purchaser □ Other (please specify) □ □ □ | | | | | | | | | | | | |
| Email: | (1 | | | Mot | oile: | | | | | | | |

| Food Processing Information Please attach a copy of your menu or provide a description of the foods to be sold at the premises | | | | | | | | | | | | |
|---|--|------------|--------------------------------|---|------------------|---|---------------------------------------|---------|--------------|------|---------|--|
| Will you be manufacturing dairy products? | | | | | | | | l Yes | | | 🗆 No | |
| Will you be processing raw meat | r, fresh poultry outlet)? | | | | Yes | 🗆 No | | | | | | |
| Will your food handling activities include (tick all that apply): | | | | | | | | | | | | |
| ☐ Making food on site | 🗆 Impo | | | | | eparing sushi | | | | | | |
| □ Purchasing food from offsite □ Repa | | | epackaging bulk dry goods | | | | parin | g Chine | ese style ro | bas | t meats | |
| Distributing food to other businesses | | | □ Washing of fresh produce □ | | | | Using the sous vide method of cooking | | | | | |
| How many staff will be employed | How many seats will be provided at the premises? | | | | | | | | | | | |
| What equipment do you have for | handling | | - | | | | | | | | | |
| □ double bowl sink | | | | for equipment and ed for the busines | ess business | | | | - | | | |
| □ single bowl sink | LISTOVE | | | | | ☐ freezer for the sole purpose of the business | | | | | | |
| □ dedicated hand wash basin | □ oven | | | □ dishwasher | | | | | | | | |
| □ sink for disposing of waste wa | | | | | | | | | | | | |
| Home Based Business O | nlv (Com | plete this | section if | you are home has | ed) | | | | | | | |
| | | - | | | | | | ⊐ Ye: | <u> </u> | T | | |
| Do you live in the house at address of the business? Type of dwelling: | | | | 🗆 Unit | | | Apartment/townhouse | | | | | |
| Please attach a copy of your house floor plan and show | | | | | | | | | | | | |
| what rooms you will use for your business. Plans attached | | | □ Yes □ No | | | | | | | | | |
| Size of Dwelling | | | oms | | Number of Bathro | | | rooms | | | | |
| Number of Living Rooms (lounge/dining) | | | | Garage 🛛 Yes 🗆 No | | | | | | | | |
| List the rooms you will be using for your business and describe how each room will be used, | | | | | | | | | | | | |
| eg kitchen and bedroom 1 will be used for storage | | | | | | | | | | | | |
| Do you need to connect to additional services to operate your business? | | | | If yes, please specify | | | | | | | | |
| For example carparking, installation of a flue over cooking equipment, connection of 3 phase power? | | | | | | | | | | | | |
| Are you required to install a grease trap by Yarra Valley | | | | □ Yes | | | | | tach a cop | y o | f the | |
| Water | | | | | ex | emption | lette | er | | | | |
| Describe how will your proposed business impact on your neighbours? Eg, noise, customer parking, odour, waste | | | | | | | | | | | | |
| What are your proposed hours of operation? | | | | | | | | | | | | |
| Are any goods offered for sale online? | | □ Yes | □ No | Will you deliver goods to custom | | | | | □ Yes | | □ No | |
| | | | □ No | How many delivery vehicles will you have? | | | | | | | | |
| Does your delivery vehicle/s exce tonne capacity? | □ Yes | □ No | Will you repackage and sell go | | | ds? | ds? 🛛 🗆 Yes | | | □ No | | |
| Will you sell goods without changing the packaging? Eg imp | | | | orting and selling to other businesses | | | | | □ Yes | | □ No | |
| Will you store equipment or goods associated with the business? | | | 🗆 No | If yes, can they be seen from th | | | e str | reet? | | | □ No | |
| Are you making structural change the layout of the dwelling? | es to | □ Yes | □ No | If yes, please describe | | | | | | | | |
| Are you using an external shed o building for the use of the busine | | □ Yes | □ No | If yes, please describe type of building and the size of the building | | | | | | | | |

Fee Schedule - 01 July 2022 – 30 June 2023

If you have ticked any of the below options, you will receive an invoice via email for payment. Once payment is received the Environmental Health Officer will proceed with your application.

Pre-Registration Plans assessment and progress inspections \$348 Class 1&2 \$260 Class 3

Council strongly recommends that you submit plans before applying for registration. This will assist in approving your registration efficiently by ensuring that the premises complies with relevant standards and to minimise the risk of having to undertake costly remedial work. The service also incorporates the costs associated with onsite progress and final inspections.

Alterations to existing premises \$174

This fee is applicable to alterations made on existing premises. All alterations are subject to Planning and Building approval

Pre Sale Inspection \$290 within 10 working days or \$580 Priority service

If you are purchasing a premises you may request a presale inspection. An inspection before settlement ensures that prospective proprietors are fully informed of any outstanding items or notices to ensure compliance with relevant legislation. Due to privacy laws, the current proprietor must sign to give consent to release the report to you or your solicitor

Planning & Building Requirements

If you are setting up a new business or altering an existing business you must first contact Council's Town Planning and Building Department to obtain written information as to whether:

• a planning permit is required for the proposed use and/or development and

• a building permit is required for the proposed premises (if required provide a copy of the building permit with the endorsed plans)

☑ I have contacted the following the following departments and authorities to ensure that I have obtained all relevant permit/application information:

| Council's Statutory Planning Unit | |
|-------------------------------------|--|
| Council's Building Services Unit | |
| Yarra Valley Water Trade Waste Team | |

The personal information requested above is for the purpose of administrating the Food Act 1984 and will be used solely by Council for that primary purpose or directly related purposes. The intended recipients of the information are Council officers. Council may disclose the information to law enforcement agencies, courts and other organisations authorised to collect it. Individuals have a right to seek access to their personal information and make corrections by contacting Council's Environmental Health Unit on 9262 6197. You may view Council's Privacy Policy on our website www.whitehorse.vic.gov.au or obtain a copy from any of the Council offices