

TAX INVOICE LIC003

# APPLICATION FOR A LICENCE FOR A FOOD PREMISES TO PROCESS/STORE MEAT Food Regulation 2015

Licensing & Accreditation Services Office Hours: 9.30am – 4.30pm Monday – Friday NSW Food Authority **ABN 47 080 404 416** PO Box 232 TAREE NSW 2430 Phone: 1300 552 406

Certain food businesses are required to hold a NSW Food Authority licence to operate. Businesses that operate without the appropriate licence from the NSW Food Authority are committing an offence under the *Food Act 2003* and may be prosecuted.

Did you know ... if you are applying to licence a business and do not hold a current NSW Food Authority licence, you can now lodge your application online by going to the online application form link at <a href="https://www.foodauthority.nsw.gov.au">www.foodauthority.nsw.gov.au</a> (Please note: conditions apply for use of online applications).

#### Meat businesses that need to be licensed

Under the Food Regulation 2015, food businesses must have a NSW Food Authority licence if they produce, store or process meat or meat products as defined under Clause 76 of the Meat Food Safety Scheme (Part 9 of the Regulation) and defined as a "meat business" under Clause 79 and operate any of the following:

- Abattoir
- Meat processing plant
- Game meat field depot
- Game meat primary processing plant
- Knackery

- Rendering plant
- Animal food processing plant
- · Animal food field depot
- Meat retail premises

If licensing is also required for a vehicle to transport meat or meat products, please complete application form *Application for food transport business for dairy/meat/plant products/seafood.* 

Licensing under this Regulation is used to ensure that a business has the capacity to produce safe food before the food is supplied to the market. A licence is not transferable from one person or business to another.

#### What do I need to comply with?

Any businesses that hold a licence must comply with the following:

- Food Regulation 2015 (NSW)
- Food Act 2003 (NSW)
- Food Standards Code
- Development and implementation of an adequate food safety program under the Food Regulation 2015 based on Standard 3.2.1 of the Food Standards Code or Codex HACCP. The program must accurately outline the hazards associated with the food business' operations. Assistance material is available from the NSW Food Authority's web site at www.foodauthority.nsw.gov.au

## What do I need to do next?

- Complete the licence application form and return it with payment to: NSW Food Authority, PO Box 232, Taree NSW 2430.
- You must not commence operations until the above steps have been completed and you are informed that your licence application has been processed. If the premises are found to be operating without a licence, enforcement action will be taken.
- Prior to the approval of a licence, a licensing assessment will be carried out to ensure compliance with the Food Standards Code and
  Food Regulation 2015. If the result of the assessment is unacceptable, the licence may not be approved and the licence application
  may be rejected. It is highly recommended the applicant refer to the Authority's website for information relating to the assessment
  process and industry sector requirements.

## **Processing times**

The Food Authority will review your application within **10 working days** of receiving your licence application and you will be notified if any further information is required. If your application is complete the Authority will write to you to let you know your licence application has been processed and provide you with a time frame for completion of the licensing assessment that is required.

Applications for production of UCFM must be accompanied by a completed pro forma. Applications without a pro forma attached will not be processed.

The technical assessment of a pro forma will be completed once all technical information has been reviewed and applicants will be advised of the outcome in writing.

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## **IMPORTANT NOTES**

- If you have more than one premises, copy page 4 and complete for each premises. If the application forms are submitted at the same time only one application fee will be required.
- Please ensure that each page of the application is completed (where applicable) and checked before it is returned, as failure to provide all information or signature(s) will delay processing and issuing of the licence.

For more information or assistance please contact the NSW Food Authority's Licensing & Accreditation Services on 1300 552 406 or go to the NSW Food Authority website at <a href="http://www.foodauthority.nsw.gov.au/industry/food-standards-and-requirements/licensing">http://www.foodauthority.nsw.gov.au/industry/food-standards-and-requirements/licensing</a>

# **APPLICANT DETAILS**

- Complete Section A(i) for sole trader/ partnership details
- Complete Section A(ii) for company/ trust/ association details

| SECTION  |            | OLE TRAD<br>Trader | ER/ PART    | NERSI     | HIP BUSINE                                  | SS STR   | Partne       |           | c appropri | ate box)  |      |  |  |  |
|----------|------------|--------------------|-------------|-----------|---|----------|--------------|-----------|------------|-----------|------|--|--|--|
| LAST NAM | IE         |                    |             |           |   | FIRS     | T NAME(S)    |           |            |           |      |  |  |  |
| LAST NAM | IE         |                    |             |           |   | FIRS     | T NAME(S)    |           |            |           |      |  |  |  |
| LAST NAM | IE         |                    |             |           |   | FIRS     | T NAME(S)    |           |            |           |      |  |  |  |
| LAST NAM | IE         |                    |             |           |   | FIRS     | T NAME(S)    |           |            |           |      |  |  |  |
|          | y of Busin | ess Name           | Certificate | issued (  | inder a tradin<br>either by Fair<br>5/2012) |          |              | P         |            |           |      |  |  |  |
| ABN      |            |                    |             |           |   |          |              |           |            |           |      |  |  |  |
| POSTAL A | DDRESS     |                    |             |           |   |          |              |           |            |           |      |  |  |  |
| SUBURB/  | TOWN       |                    |             |           |   | STATE    |              | P         | OSTCODE    |           |      |  |  |  |
| PHONE    |            | (                  | )           |           |   |          | FAX          | ( )       |            |           |      |  |  |  |
| MOBILE   |            |                    |             |           |   |          | EMAIL        |           |            |           |      |  |  |  |
| AUTHORIS | SED CON    | TACT DET           | AILS (if d  | lifferer  | nt to inform                                | ation p  | rovided abov | ve e.g. M | lanager, Q | A, Admin, | etc) |  |  |  |
| Mr       | М          | rs                 | Miss        |           | Ms  | Dr       | Profess      | or        | Other      |           |      |  |  |  |
| NAME     |            |                    |             |           |   |          |              |           |            |           |      |  |  |  |
| POSITION | 1          |                    |             |           |   |          |              |           |            |           |      |  |  |  |
| PHONE    |            |                    |             |           |   |          | FAX          |           |            |           |      |  |  |  |
| MOBILE   |            |                    |             |           |   |          | EMAIL        |           |            |           |      |  |  |  |
| DO YOU H | AVE AN E   | XISTING            | NSW FOO     | DD AUT    | THORITY LI                                  | CENCE    | ?            |           |            |           |      |  |  |  |
| NO       | YE         | <b>ES</b> – please | e give deta | ils (eg L | icence numb                                 | er or cu | stomer no.)  |           |            |           |      |  |  |  |

| SECTION A (ii   | i): cor        | MPAN    | Y/ TRUST     | ASSOCIAT       | TION BUSI     | NESS STRU   | JCTUI | RE (pleas | e tick appropria | te box) |
|---|----------------|---------|--------------|----------------|---------------|-------------|-------|-----------|------------------|---------|
|   | Con            | npany   | / Tı         | ust            | Association   | on          | Othe  | r         |                  |         |
| COMPANY NAM<br>copy of full ASIC<br>officers/ director  | Compan         |         |              |                | of public     |             |       |           |                  |         |
|   |                |         |              |                | AC            | N           |       |           |                  |         |
| CONSENT TO CONDUCT COMPANY SEARCH ON BEHALF OF APPLICANT/S  If it is not possible for supporting documents to be provided during the application process, an applicant may give consent to the NSW Food Authority, to conduct a company search on their behalf.  Failure to supply supporting documents may result in delays in processing applications and issuing of the licence.  I/We, the applicant/s conducting the food business for which this form is being submitted, give consent for a NSW Food Authority representative to conduct a company search on our behalf.  I/We agree to pay the fees applicable to this service, as per the fee schedule enclosed in this application. |                |         |              |                |               |             |       |           |                  |         |
| TRUCT NAME (  | : <i>c</i> !:- | -  - \  | - TC - L     |                | da(a)         |             |       |           |                  |         |
| TRUST NAME (in nominated person   |                |         |              |                | de name(s)    | ОГ          |       |           |                  |         |
| ASSOCIATION provide a copy of   |                |         |              |                | tion, please  | P           |       |           |                  |         |
| ABN   |                |         |              |                |               |             |       |           |                  |         |
| <b>TRADING NAM</b> please provide co<br>Trading NSW (if   | opy of Bu      | usiness | s Name Cert  | ificate issued | d either by F | air //      |       |           |                  |         |
| POSTAL ADDRI  | ESS            |         |              |                |               |             |       |           |                  |         |
| SUBURB/ TOW   | /N             |         |              |                |               | STATE       |       |           | POSTCODE         |         |
| PHONE   | (              |         | )            |                |               | FAX         | (     | )         |                  |         |
| MOBILE  |                |         |              |                |               | EMAIL       |       |           |                  |         |
| AUTHORISED (  | CONTAC         | T DET   | <b>TAILS</b> |                |               |             |       |           |                  |         |
| Mr  | Mrs            |         | Miss         | Ms             | Dr            | Profess     | sor   | Ot        | :her             |         |
| NAME  |                |         |              |                |               |             |       |           |                  |         |
| POSITION  |                |         |              |                |               |             |       |           |                  |         |
| PHONE   |                |         |              |                |               | F           | AX    |           |                  |         |
| MOBILE  |                |         |              |                |               | E           | MAIL  |           |                  |         |
| DO YOU HAVE A   | AN EXIS        | TING    | NSW FOO      | D AUTHORI      | ITY LICENC    | E?          |       |           |                  |         |
| NO  | YES            | - plea  | ase give det | ails (eg Licer | nce number    | or customer | no.)  |           |                  |         |

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| Is the business   | ınder this application being taken over fro   | om an existing licence h        | older?       |     |  |  |  |  |  |  |  |  |  |  |
|---|---|---------------------------------|--------------|-----|--|--|--|--|--|--|--|--|--|--|
| NO – Please p   | NO – Please proceed to communication section below.   |                                 |              |     |  |  |  |  |  |  |  |  |  |  |
| <b>YES</b> – If possi   | ole, please arrange for the previous owner to complete the 'Consent of Present Licensee' section below:       |                                 |              |     |  |  |  |  |  |  |  |  |  |  |
| <ul> <li>CONSENT OF PRESENT LICENSEE(S) (if applicable)</li> <li>I/we hereby certify that I am authorised to submit this form on behalf of this business.</li> <li>If a company, show capacity of person signing</li> </ul> |   |                                 |              |     |  |  |  |  |  |  |  |  |  |  |
| • •   | tensee(s), will/will not continue to conduct a food business cence for the premises. My/Our licence number is | using the premises and agree/do | not agree to | the |  |  |  |  |  |  |  |  |  |  |
| SIGNATURE(S)  | X   | DATE                            | / /.         |     |  |  |  |  |  |  |  |  |  |  |
|   |   |                                 |              |     |  |  |  |  |  |  |  |  |  |  |

# **COMMUNICATION**

| Do you | wish to receive the NSW Food Authority 'Foodwise' newsletter for licensees? |
|--------|---|
|        | NO – I do not wish to receive the 'Foodwise' newsletter                     |
|        | YES – Please send to the email address indicated above                      |

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# **BUSINESS ACTIVITY DETAILS**

# Is the business relocating from an existing site?

| <b>NO</b> – F | Please proceed to business activity and location section below.   |
|---------------|---|
| YES-P         | Please confirm existing site address and then proceed to business activity details and location sections below: |
| LOCAT         | TION OF EXISTING SITE   |

# FOOD PROCESSING/STORAGE ACTIVITY DETAILS (please tick appropriate box/es)

|               |   |   | FF -F 7 7   |
|---------------|---|---|---|
| Prem<br>not p | ises where unflayed carcase ackaged, processed, treated                         | I, boned or cut up for animal food/ human     | as animal food or for human consumption) is stored but consumption (game meat).  WS-CP NUMBER               |
|               | Same Meat Field Depot   | - NUMBER OF CHILLERS                          | WS-CP NUMBER  |
|               | SPECIES STORED/PROC   |   |   |
|               | ☐ Kangaroo Pleas  |   | iate permit from the NSW Department of Climate Change,  |
|               | ☐ Camel   |   |   |
|               | ☐ Goat  |   |   |
|               | ☐ Other   |   |   |
| р             | rocessing and/or rendering p  | plant are also conducted at the Abattoir site | man consumption. If activities in relation to a meat<br>e, please complete the Meat Processing Plant and/or |
|               | endering Plant sections belo  |   |   |
| L             | •   | cies (please tick species handled below):     |   |
|               | <ul><li>□ Bovine (i.e. bull, ox, st</li><li>□ Ovine (i.e. ram, ewe, v</li></ul> |   |   |
|               | ☐ Caprine (i.e. goat, kid)  |   |   |
|               | ☐ Porcine (i.e. swine, pig  | •   |   |
|               | Deer;   | , joji  |   |
|               | ☐ Buffalo;  |   |   |
|               | ☐ Equine (i.e. horse)   |   |   |
|               | Slaughter of non-red meal   | t species (please tick species handled belov  | n):   |
|               | ☐ Poultry (i.e. chicken, to   | urkey, duck, squab, pigeons, any other bird   | ds);  |
|               | ■ Rabbit;   |   |   |
|               | ☐ Crocodile;  |   |   |
|               | □ Ratite (i.e. emu, ostric  | •   |   |
|               |   | of UCFM (uncooked, comminuted, ferment        |   |
|               |   | completed pro forma will not be proc          | e accompanied by a completed Pro Forma.   |
|               | Pro forma attached  | □ Yes □ No                                    |   |
|               | Production/processing of r  | ready-to-eat (RTE) meat or meat products      |   |
|               |   |   | ousiness (preparing or selling animal food):  |
|               | _   | ct of meat or fish is stored, packed, packag  | ,   |
|               | Processed animal food is p  |   | position of the up  |
|               |   |   |   |

| recei<br>up oi | ved from the fient those premise | <b>Processing Plant</b> – premises where in the course of a business, unflayed carcases of game animals are all or a game meat field depot and are flayed, whether or not the carcases are further treated, boned or cut are intended for (please tick) |
|----------------|----------------------------------|---|
|                | I Kangaroo                       | SED (please tick appropriate box/es)  Please ensure that you have obtained the appropriate permit from the NSW Department of Climate Change, Energy, The Environment and Water  |
|                | Wild boar                        | Lifergy, The Lifvironment and Water   |
|                | Deer                             |   |
|                | Rabbit/hare                      |   |
|                | <b>1</b> Camel                   |   |
|                | <b>l</b> Goat                    |   |
|                | Other                            |   |
| INT            | ENDED USE                        |   |
|                | I Human consu                    | umption   |
|                | 1 Animal food                    |   |
|                | Manufacture                      | RTE (ready-to-eat)  |
|                |                                  | UCFM (uncooked, comminuted, fermented meat)   |
|                | I <i>pplications</i> w           | Il applications for production of UCFM must be accompanied by a completed Pro Forma.  vithout a completed pro forma will not be processed.  |
|                | Pro forma at                     |   |
| conn           | ection with, the                 | es used for, or in connection with, the slaughter of knackery animals for use in animal food, or for, or in e destruction of knackery animals for the making of animal by-products that are used in animal food   |
|                | -                                | meat species (please tick species handled below):   |
|                |                                  | oull, ox, steer, cow, heifer, calf);<br>im, ewe, wether, hogget, lamb);   |
|                | Caprine (i.e.                    |   |
|                | Porcine (i.e.                    |   |
|                | Deer;                            |   |
|                | 】Buffalo;<br>】Equine (i.e. h     | norse)  |
|                |                                  | n-red meat species (please tick species handled below):   |
|                | -                                | chicken, turkey, duck, squab, pigeons or any other birds);  |
|                | Rabbit;                          |   |
|                | Crocodile;                       |   |
|                | 1 Ratite (i.e. er                |   |
|                | e course of a bu                 | including meat OR ☐ Meat Processing Plant (please tick appropriate box) for premises where in usiness Abattoir meat products produced are handled as below (please tick appropriate box/es):  |
|                | ☐ Boned & sli                    | abattoir meat or meat products<br>iced meats  |
|                | □ Packaged n                     |   |
|                | □ Dried meat                     |   |
|                |                                  | r-to-eat) meat products (e.g. smallgoods)   |
|                |                                  | ckaged RTE (ready-to-eat) meat products<br>ooked, comminuted, fermented meat)   |
|                | •                                | All applications for production of UCFM must be accompanied by a completed Pro Forma.   |
|                | Applications                     | without a completed pro forma will not be processed.  |
|                | Pro forma at                     |   |
|                |                                  | er foods <u>as well as abattoir meat</u> , as defined under Food Regulation 2015, as below (please tick):   |
|                |                                  | y products as defined under Clause 59<br>lucts as defined under Clause 120  |
|                |                                  | seafood products as defined under Clause 133  |
|                |                                  | fined under Clause 165 or egg products as defined under Clause 168(2)   |
|                | Note: Please i                   | ndicate if you require a Cold Food Store Food Safety Program (for which a fee is payable).  |
|                | YES                              | □ NO  |
|                | Game meat pro                    | oducts produced (please tick appropriate box/es):   |
|                | □ Boned & sli                    |   |
|                | □ Packaged n                     |   |
|                | □ Dried meat □ RTF (ready        | s<br>-to-eat) meat products (eg smallgoods)   |
|                |                                  | ckaged RTE (ready-to-eat) meat products   |
|                |                                  | ooked, comminuted, fermented meat)  |
|                |                                  | All applications for production of UCFM must be accompanied by a completed Pro Forma.   |
|                |                                  | without a completed pro forma will not be processed.  |
|                | Pro forma at                     | tached 🛘 Yes 🗘 No   |

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|   | Premises – premises where meat is sold by retail and on which raw meat carcases or parts of raw meat carcases  |  |
|---|--|--|
| and sells less  | in some way (such as boning, slicing or cutting), or on which processed meat is produced or further processed than 1 tonne of meat a week but does not sell meat in a form ready to be consumed (ie restaurant, takeaway cook and chill meat:  |  |
| 1   | d & sliced meats   |  |
|   | aged meats   |  |
| □ Dried   |  |  |
| □ RTE   | (ready-to-eat) meat products (e.g. smallgoods)   |  |
|   | um packaged RTE (ready-to-eat) meat products   |  |
| □ UCFN  | 1 (uncooked, comminuted, fermented meat)   |  |
| Applica   | note: All applications for production of UCFM must be accompanied by a completed pro forma.<br>tions without a completed pro forma will not be processed.  |  |
| Pro for   | ma attached   Yes   No   |  |
| It is ad<br>Please<br>• NSW<br>• NSW<br>• NSW                             | requirement of the Food Regulation 2015 that a food safety program be implemented and maintained. visable that a Food Safety Program pack be ordered if one is not already in place to comply with this requirement. indicate if you require a Food Safety Program Pack (for which a fee is payable). The pack consists of: Standards for Construction and Hygienic Operation of Retail Meat Premises  Retail Meat Food Safety Program  Food Authority Retail Diary  S □ NO  |  |
| knackery for t  | lant – premises where animal by-products are rendered or boiled down, but does not include an abattoir or he following products: on/processing of meat meal on/processing of tallow  |  |
|   | VED FACILITY? ☐ YES — EXPORT APPROVED: EXPORT REG EST NO:  |  |
|   | ☐ YES - EXPORT TIER 1: EXPORT REG EST NO:  |  |
|   | □ NO   |  |
|   |  |  |
| Nominated com   | mencement of trading   |  |
| NUMBER OF FU handlers employe excluding office si                         | LL TIME EQUIVALENT FOOD HANDLERS: Note: The number of full time equivalent (FTE) food d in your processing/storage operation as determined by the calculation on page 9 of this form taff, delivery drivers, etc. The Food Regulation 2015 prescribes the appropriate licence fee (based on ople working in the premises) and application fee to be applied to all licences.   |  |
| date:  NUMBER OF FU handlers employe excluding office s' the number of pe | LL TIME EQUIVALENT FOOD HANDLERS: Note: The number of full time equivalent (FTE) food d in your processing/storage operation as determined by the calculation on page 9 of this form taff, delivery drivers, etc. The Food Regulation 2015 prescribes the appropriate licence fee (based on  |  |
| date:  NUMBER OF FU handlers employe excluding office si the number of pe | LL TIME EQUIVALENT FOOD HANDLERS: Note: The number of full time equivalent (FTE) food d in your processing/storage operation as determined by the calculation on page 9 of this form taff, delivery drivers, etc. The Food Regulation 2015 prescribes the appropriate licence fee (based on ople working in the premises) and application fee to be applied to all licences.  ITY LOCATION DETAILS   |  |
| date:  NUMBER OF FU handlers employe excluding office s' the number of pe | LL TIME EQUIVALENT FOOD HANDLERS: Note: The number of full time equivalent (FTE) food d in your processing/storage operation as determined by the calculation on page 9 of this form taff, delivery drivers, etc. The Food Regulation 2015 prescribes the appropriate licence fee (based on ople working in the premises) and application fee to be applied to all licences.  TITY LOCATION DETAILS  same as for postal address provided previously?   |  |
| date:  NUMBER OF FU handlers employe excluding office s' the number of pe | LL TIME EQUIVALENT FOOD HANDLERS: Note: The number of full time equivalent (FTE) food d in your processing/storage operation as determined by the calculation on page 9 of this form taff, delivery drivers, etc. The Food Regulation 2015 prescribes the appropriate licence fee (based on ople working in the premises) and application fee to be applied to all licences.  ITTY LOCATION DETAILS  same as for postal address provided previously?  Implete location section below.  Tocceed to fee schedule and payment section  EMISES |  |

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#### **FEE SCHEDULE**

| Premises Type   | No. of full<br>time<br>equivalent<br>food handlers | Licence fee  |                | Total licence fee payable (No. of premises x licence fee) |  |  |  |
|---|--|--------------|----------------|---|--|--|--|
| Animal Food Field Depot   | -  | \$374.00     |                |   |  |  |  |
| Abattoir, Animal Food Processing Plant, Cold  | 0 to 5   | \$559.00     |                |   |  |  |  |
| Food Store, Game Meat Field Depot, Game<br>Meat Primary Processing Plant, Knackery, | 6 to 50  | \$1,155.00   |                |   |  |  |  |
| Meat Processing Plant, Meat Retail or Rendering Plant                               | 51+  | \$5,086.00   |                |   |  |  |  |
| Additional chargeable items   | _  | No. of packs | Total cost     |   |  |  |  |
| Food safety program pack – Meat retail premises only                                |  |              | \$73.00        |   |  |  |  |
| Food safety program – Cold food store only  |  |              | \$65.00        |   |  |  |  |
| Company search administration fee   |  | \$50.00      |                |   |  |  |  |
|   |  | AF           | PLICATION FEE  | \$50.00   |  |  |  |
|   |  | ТОТ          | AL FEE PAYABLE |   |  |  |  |

#### **DECLARATION**

| <ul> <li>SIGNATURE(S) OF ALL APPLICANT(S) – Please sign below with name clearly printed underneath</li> <li>I/we hereby certify that all information provided on this form is true and correct.</li> <li>I/we hereby certify that I am authorised to submit this form on behalf of this business.</li> </ul> |   |      |   |   |  |  |  |  |  |  |
|--|---|------|---|---|--|--|--|--|--|--|
| SIGNATURE(S)   | X |      |   |   |  |  |  |  |  |  |
| PRINT NAME(S)  |   | DATE | / | 1 |  |  |  |  |  |  |
| POSITION WITHIN ORGANISATION   |   |      |   |   |  |  |  |  |  |  |

#### Please note:

For new licence applications, the fee to accompany this application form is the total of both the application fee and licence fee indicated above.

For applications on an existing licence, please submit form with application fee \$50.00 only. An invoice for the licence fee will then be returned to you for payment.

For applications where an ASIC Company Statement is required and has not been supplied, the company search administration fee is also to accompany the application.

For applications for meat retail premises (where a food safety program and retail diary recording etc is not already in place), it is advisable that a food safety program pack (consisting of a NSW Standards for Construction and Hygienic Operation of Retail Meat Premises, NSW Retail Meat Food Safety Program and NSW Food Authority Retail Diary) be ordered to meet the requirements of the Food Regulation 2015. Food Safety Program pack/s can be ordered and paid for on the fee schedule above.

# **CALCULATING LICENCE FEES**

The licence fee applied to your business is calculated based on the number of full time equivalent (FTE) food handlers involved in food handling. The number of FTE food handlers is used as it also accommodates businesses who use part time food handlers in their operations. For the purposes of this calculation, a FTE working week is 38 hours.

To calculate the number of FTE food handlers your business has, add up all the hours that the food handlers are undertaking food handling activities during a working week and divide by 38 hours (average working week). For example, if a facility had 4 food handlers to handle food for 25 hours per week, this would equate to approximately 3 FTE food handlers.

## Figure 1: Example calculation of FTE food handlers

4 food handlers x 25 hours per week = 2.6 FTE food handlers (round up to 3 FTE food handlers) 38 hours

#### **PAYMENT METHODS**

## A. PAYMENT BY CHEQUE OR MONEY ORDER

Please mail money order or cheque (crossed 'Not negotiable' and made out to NSW Food Authority) along with completed application form to PO Box 232, Taree NSW 2430

#### **B. PAYMENT BY CREDIT CARD**

| Please debit my:          | Ш    | MasterCard  |      |    | Ш  | Vis | sa o | car | d   |     |      |    |      |    |    |     |    |     |      |      |
|---------------------------|------|-------------|------|----|----|-----|------|-----|-----|-----|------|----|------|----|----|-----|----|-----|------|------|
| Card number:              |      |             |      |    |    |     |      |     |     |     |      |    |      |    |    |     |    |     |      |      |
| Cardholder's name:        |      |             |      |    |    |     |      |     |     |     |      |    |      |    |    |     |    |     |      |      |
| CVV number:               |      |             |      |    |    |     | ٠.   |     |     |     |      |    |      |    |    |     |    |     |      |      |
| (the final three digits o | of t | he number p | rint | ed | on | the | sig  | gna | tur | e s | trip | or | 1 tl | ne | ba | ick | of | you | ur c | ard) |
| Expiry date:              |      |             |      | ٠. |    |     | ٠.   |     |     |     |      |    |      |    |    |     |    |     |      |      |
| Payment amount:           |      |             |      |    |    |     |      |     |     |     |      |    |      |    |    |     |    |     |      |      |
| Cardholder's signature    | :    |             |      |    |    |     |      |     |     |     |      |    |      |    |    |     |    |     |      |      |

Please note: We do not accept American Express.

## C. PAYMENT BY BPAY®, INTERNET BANKING OR TELEPHONE

If you wish to make payment by any of the above methods, please submit your completed application form without payment to Licensing & Accreditation Services by:

- Post to PO Box 232, Taree NSW 2430
- Email to <a href="mailto:bfs.admin@dpi.nsw.gov.au">bfs.admin@dpi.nsw.gov.au</a>

An invoice will then be forwarded to you for payment. (NB: The application will not be processed until payment of the invoice is confirmed).

#### **CHECKLIST**

To avoid any delays in the processing of your application, please ensure all relevant documentation is submitted with this application form.

- Y Application form completed and signed
- Y ASIC Company Statement showing the name/s of the Director/s attached (where applicable)
- Certificate of Registration of business name attached (where applicable) issued either by Fair Trading NSW (if registered before 28/5/2012) or ASIC (if registered after 28/5/2012)
- Y Certificate of Incorporation attached (where applicable)
- Y Payment attached
- Y Pro forma for production of UCFM (where applicable)

Please return all pages of your Food Authority licence application to:

NSW Food Authority PO Box 232 TAREE NSW 2430

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