



Please use a **BLACK** or **BLUE** ballpoint pen and write in CAPITAL letters inside the box

1

Type of premises:

Tick only one of the boxes below:

- Fixed food premises – One site
- Fixed food premises – Multi-site food business*
- Fixed food premises – Multi-business food business*
- Mobile shop*
- Market stall, food stall, food promotions and tastings*



* If applying for a multi-site, multi-business, mobile shop or market stall, food stall, food promotions or tastings registration, please also complete the required additional forms.

OFFICE USE ONLY

2

This application is for:

Tick only one of the boxes below:

- MPI template food control plan: Food Service and Retail
- MPI template food control plan: Simply Safe and Suitable
- National Program 1 (NP1) National program 2 (NP2) National Program 3 (NP3)



Rotorua Lakes Council is unable to verify National Programs. For more information on National Program verifications and who offers this service, see <http://www.foodsafety.govt.nz/registers-lists/fsp-consultants.htm>

3

Your business details:

Full name or company name

NZ Business number (NZBN)



If you have a New Zealand Business Number (NZBN), provide this. For more information about NZBN's, including how to get one, see <https://www.business.govt.nz/companies>

Trading name



Attached a copy of the company name registration from the New Zealand Companies office (www.companies.govt.nz)

Address of premise/location

Postal address (if different from above)

This address is a private dwelling house and I wish it to be withheld from the public register.



Phone

AREA

PHONE NUMBER

Mobile

AREA

PHONE NUMBER

Email

Opening hours

4 Your contact and managers details:

Contact person

The persons details entered below will be used for all communications about your registration, such as sending approval documents and renewal reminders.

Full name

Position

Phone

AREA

PHONE NUMBER

Email

Day-to-Day Manager

Full name

Position

5 Who will be doing your audits/verifications:

Tick only one of the boxes below:

Rotorua Lakes Council

Other agency



If not Rotorua Lakes Council, attach a confirmation letter from your verification agency.

6 Checklist:

- Bring completed Food Control Plan to be vetted by Licensing Officer (not required for National Programme)
- Scope of Operations of Food Business form (to be completed with Licensing Officer)
- A copy of the Certificate of Incorporation (if applying in a company name)
- Multi-Site Business Details form where there is more than one site
- A copy of the confirmation letter from your verification agency (for National Programmes only)
- Relevant fees

7 Privacy Information and Declaration

- ▶ I am authorised to make this application as the operator or a person with legal authority to act on behalf of the operator; and
- ▶ The information supplied in this application is truthful and accurate to the best of my knowledge and belief; and
- ▶ The operator is a resident in New Zealand within the meaning of section YD 1 or YD 2 (excluding section YD 2(2)) of the Income Tax Act 2007; and
- ▶ The operator of the food business is able to comply with the requirements of the Food Act 2014
- ▶ The information you have provided is required so that your application can be processed and for statistical purposes. Under the Local Government Official Information and Meetings Act 1987, the council may be required to disclose the information to people who request it. If you would like to request access to or correction of your personal information, please contact the council.

Sign here



Date signed

Office Use

Assessing officer

Approved

Hold

Return to Officer

Application type

New FHR to FCP

Lic/Reg fee

\$

File No.

NFEF (GL)

\$

Licence No.

FCP/Diary fee (GL)

\$

Premises No.

TOTAL

\$

OZONE Contact No.

Payment date

MPI No.

Receipt No.

Notes: