## APPLICATION FOR APPROVAL TO CONDUCT TEMPORARY FOOD/DRINK STALL



Stall Name								
Business Name		ABN	ABN					
Name of Applicant			Set up (please tick)  Tent/marquee □ Van □ Other					
		-						
Postal Address		Location of Sta	II/Venicle					
Phone (business)	Phone (h	ome)	Phone (mobile)					
Email		Hours of Operat	ion					
Name & Date(s) of e	vent/venue							
List full range of foo	ds to be offered							
Food Safety Supervis	or name:							
Certificate Identification	on	Expir	/ date:					
	Food Safety Supervisor Ce the food outlet is operating.	tificate is to be available for	perusal on demand by an authorised					
Off site food prepa	aration area(s) Please at	tach letter from Home C	Council					
Please provide detail	s of the location(s) of any of	-site food preparation areas	and/or food storage including partial					
hygiene requirements	s. Provide written evidence f	rom the Council where the p	Each preparation area must meet food remises are located indicating the premises					
nave been approved	for the preparation of food fo	or sale.						
Facility location 1:								
Business Name:								
Address:								
Suburb		State	P/Code					
Facility location 2:								
Business Name:								
Address:								
	Suburb	State	P/Code					

Food	Food stall construction and layout (Dimensional plan/s)																		
Please	draw	a plai	n of yo	ur sta	ll on t	ne grid	d belo	w. La	bel ea	ch are	ea with	n the c	corres	oondir	ng nun	nbers	from t	he leg	jend
below.	Plea	se fee	I free	to add	l any a	dditio	nal ar	eas/ite	ems th	at you	ı may	have.							
<ol> <li>3.</li> <li>4.</li> </ol>	Fridge	prepa e or c	aratio old st	orage	a e acilitie	es				8	  								
5.										1	0								

## **Applicant check-list. Please tick ☑ information enclosed**

✓	Information Required with Application											
Proposed Activity - Detailed submission describing the proposed activity and how the activity will be conducted.												
Dimensional plan/s drawn at appropriate scale showing the proposed location of the stall from which it is proposed to sell any article in a public place, including locations where stall is likely to occur (PTO)												
	sposal of all waste.	/aste.										
	Organisers consent – written constant – written consent – written consent – written constant – written consent – written – writt	onfirmation	from the or	ganiser of the event/ven	ue of your							
	Approval from home Council											
Note	e: Applications which do not co	ntain the a	above info	mation will be refused	l.							
App	licant declaration											
ever decla appli	re read, understood and will fully onts" (http://www.foodauthority.nsw.are that the information provided of ication and approval of this application.	gov.au/reta on this form ation is not	nil/retail-bus is accurate guaranteed	iness-types/markets-tem , complete and correct.	nporary-events/#.VVI I understand that this	DWmccTGg). s is an						
inam	ie:	Sign	ature:		Date:							
	ning and Environmental Services	Departmen	t on 02 636	8 2104.								
Appli	cation No. IAPP/											
	– Job No. 11801020.131											
Application Fee		Am	ount	Receipt No	Date							
Tem	porary Food Stall Application											
Cust	omer Service Officer's Checl	k List										
	Submitted and Satisfactory		] Uns	atisfactory	N/A							
	's Recommendation: the application be:	□ R	efused (re	ubject to conditions fer EHO Comments)								
			oo Fuitile	Information Required								