

# Food safety program

## Accreditation application

Food Act 2006

Council of the City of Gold Coast  
ABN 84 858 548 460  
PO Box 5042 GCMC QLD 9726  
P 1300 GOLDCOAST  
(1300 465 326)  
E [mail@goldcoast.qld.gov.au](mailto:mail@goldcoast.qld.gov.au)  
W [cityofgoldcoast.com.au](http://cityofgoldcoast.com.au)

Applicant details			
Applicants must be legal entities (e.g. person or corporation). Provide the full name of all applicants. If address and contact details differ for each applicant, provide these details as an attachment.			
Applicant name(s)			
Postal address			
Suburb			
State		Postcode	
Email			
Phone (mobile)		Phone (b/hours)	
Preferred method to receive correspondence	<input type="checkbox"/> Post		<input type="checkbox"/> Email

Business name details			
Provide details of your business name (trading name). Include address /contact details if different to applicant.			
Business name			
Postal address			
Suburb			
State		Postcode	
Email			
Phone (mobile)		Phone (b/hours)	

Contact person details			
Provide details if contact person for approval is different from the applicant.			
Contact name			
Postal address			
Suburb			
State		Postcode	
Email			
Phone (mobile)		Phone (b/hours)	
Preferred method to receive correspondence	<input type="checkbox"/> Post		<input type="checkbox"/> Email

Location details			
Provide details of the location of the associated food business (if fixed location).			
Location name			
Unit number		Street number	
Street name			
Suburb			
Parcel (RPD)	Lot	Plan	

Food safety program	
Select the reason for submitting a food safety program for accreditation *	
<input type="checkbox"/> Aged/medical care centre	<input type="checkbox"/> Child care centre
<input type="checkbox"/> Caterer off-site	<input type="checkbox"/> Delivered meal organisation
<input type="checkbox"/> Caterer on-site	<input type="checkbox"/> Voluntary
Food licence reference (licence number)	
FSP auditor name	
FSP auditor ID number	
FSP auditor address	
FSP auditor phone	
FSP auditor email	

Supporting information
Supporting information is required to be submitted with this application, as indicated below and throughout this form. Failure to provide the required information may delay the processing of your application. Indicate below the supporting information you have attached to this application
<input type="checkbox"/> Food safety program
<input type="checkbox"/> Notice of written advice
<input type="checkbox"/> Evidence of nil fee eligibility

## Fees

The fee for this application may be reduced to nil if you (the applicant) can demonstrate that you own, rent or lease a rateable property within the City of Gold Coast, or are a registered charity, voluntary sporting, community, religious or incorporated not for profit organisation.

If claiming eligibility, you must attach evidence with this application. Evidence may include a signed lease agreement, details of property ownership, ASIC documentation detailing 'Principal place of business', two bills (within last six months) detailing residential address or registration with the Australian Charities and Not-for-Profits Commission (ACNC).

**Please determine whether you meet the eligibility conditions and select one box only.**

<input type="checkbox"/> <b>Eligible - nil fee</b>	<b>nil</b>
<input type="checkbox"/> <b>Not eligible – Food safety program accreditation fee</b>	<b>\$722.00</b>

These fees are in accordance with the City of Gold Coast's (City) regulatory fees and non-regulatory charges. A copy of our regulatory fees and non-regulatory charges can be found on our website, [cityofgoldcoast.com.au/fees](http://cityofgoldcoast.com.au/fees).

## Payment options (no cash transactions are available)

- MasterCard, Visa, debit card or cheque at any of the City's branch offices. Our branch office locations and operating hours can be found on our website [cityofgoldcoast.com.au/contactus](http://cityofgoldcoast.com.au/contactus)
- Cheque or money order – make payable to: Gold Coast City Council. Postal address at top right of first page. Please ensure that you provide adequate reference details or attachments to allow the cheque to be appropriately receipted

**Note: Please be advised that payments by credit card will incur a surcharge.**

## Declaration

This section must be completed by, or for each applicant. Where a person is signing on behalf of a corporation or person (the 'signatory'), they must occupy a position that is legally entitled to make that application and complete the details below. Documentation must be provided if a power of attorney (POA) signs on behalf of a person.

I understand and verify that:

- I am duly authorised to make this application
- The statements and information provided are accurate, true and complete
- I have received all relevant third party consents and authorisations
- It is an offence to knowingly provide false or misleading information
- Approval of this application does not extend to the approval of any other statutory or local government requirements relating to this premises or activity

### Applicant one (person or organisation)

<b>Applicant name</b>		<b>Signatory name</b>	
<b>Signature</b>		<b>Position/role</b>	
<b>Date</b>			

### Additional applicant (if required)

<b>Applicant name</b>		<b>Signatory name</b>	
<b>Signature</b>		<b>Position/role</b>	
<b>Date</b>			

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**Privacy statement**

Council of the City of Gold Coast (Council) is collecting your personal information in order to provide the services requested, perform associated Council functions and services, and to update and maintain Council's customer information records. Your information is handled in accordance with the *Information Privacy Act (Qld) 2009* and may only be accessed by Councillors, Council employees and authorised contractors. Unless authorised or required by law, we will not provide your personal information to any other person or agency. For further information go to [cityofgoldcoast.com.au/privacy](http://cityofgoldcoast.com.au/privacy).

Council may also use your personal information in order to contact you to provide you with information regarding Council functions and services. If you do not wish to receive such information please opt out using the unsubscribe link in the communication material sent to you.

Office use only			
Date received		Fee paid	
Received by		Receipt number	