

# Food Event Notification Form

This Food Event Notification form is designed for a single organisation selling food from a temporary event. Please complete and return this form 14 days prior to the event.

## Part 1 – Food Business Ownership Details

Name of Proprietor: \_\_\_\_\_

Business Name: \_\_\_\_\_

ABN No: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Numbers: Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## Part 2– Food Event Information

Event Name: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Date of Event: \_\_\_\_/\_\_\_\_/\_\_\_\_ Operating Times: \_\_\_\_\_

Are foods prepared on site?  Yes  No

If no, where are they prepared? \_\_\_\_\_

Number of people handling food: \_\_\_\_\_ Number of People attending the event: \_\_\_\_\_

Please provide a description of the event and the food to be sold: \_\_\_\_\_

Is the event being held on Council land?  Yes  No

If yes, has a permit application been completed?  Yes  No

## Part 3 – Food Safety Control

a. Are temperature control appliances available? <sup>1</sup>  Yes  No

If yes, please specify \_\_\_\_\_

b. Is a probe thermometer available? <sup>2</sup>  Yes  No

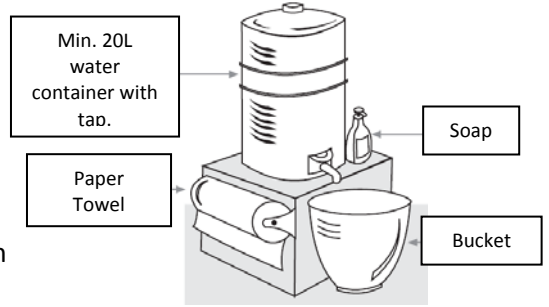
c. Are hand washing facilities available? <sup>3</sup>  Yes  No

If yes, please specify \_\_\_\_\_

<sup>1</sup> **Temperature Control Appliances** refer to heating and cooling equipment, for example, Bain-Maries, fridges, eskies etc. They are required to keep all potentially hazardous foods such as raw and cooked meats (e.g. sausages), seafood, chicken, dairy products and cooked rice and pasta at 5°C or below, or at 60°C or above to minimise the growth of food poisoning bacteria.

<sup>2</sup> **Probe Thermometers** are required to check that all potentially hazardous foods are at 5°C or below, or at 60°C or above. They should be at a range that can read to +/-1°C.

<sup>3</sup> **Hand Washing Facilities** are required within the food handling area. If a permanent fixture is not available this can be substituted with a 20L plastic container (with a tap) with potable water, a bucket to catch the waste water and a supply of soap and paper towel.



**Part 4 – Food Transport Vehicles**

Will transport vehicles be used to transport food to the event? Yes No

If yes, is this vehicle a refrigeration vehicle? Yes No

If no, what other means will be used to ensure all potentially hazardous foods (if any) are kept under temperature control during transportation \_\_\_\_\_

**Part 5 – Declaration**

I hereby declare that the information contained in this food notification form is accurate and complete.

Name: \_\_\_\_\_ Contact Phone No: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

***Please be aware that an inspection of your business may be undertaken on the day of the event. If you require further information, please contact Council’s Environmental Health Department on 8408 1111.***

**Office Use Only**

Notification Received By: \_\_\_\_\_  
(Authorised Officer)

Date Notification Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Inspection Required: Yes No