

Environmental Health Unit
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Privacy:

The personal information that you have provided in this form is for Council purposes only and will be viewed by Councillors and Council staff only

FOOD BUSINESS REGISTRATION FORM

Business shop location details

Trading name:.....

Address: Shop/Unit No..... Street No..... Street.....

.....Suburb:.....Postcode:.....

Trading Hours:.....

ANZFA priority classification:..... Number of food handlers:.....

Business type (restaurant, bakery, take away):.....

Business owner's details

Company name/sole trader's name:.....

ABN/ACN:.....

Postal address:.....Postcode:.....

Suburb:.....Phone:.....

Email address:.....

Residential address:.....Postcode:.....

Suburb:.....Phone:.....

Business owner's authority

I hereby apply for registration of the food business described in this application.

Signature of business owner:.....Date:.....