



Clutha District Council  
1 Rosebank Terrace, PO Box 25, Balclutha, 9240  
Phone: 0800 801 350 Email: [help.desk@cluthadc.govt.nz](mailto:help.desk@cluthadc.govt.nz)  
Website: [www.cluthadc.govt.nz](http://www.cluthadc.govt.nz)

May 2018

## FAA-01

# APPLICATION FOR REGISTRATION FOOD ACT 2014

## Before you start, let's check that you have everything you will need:

- The completed scope of operations document. Find this at [www.mpi.govt.nz](http://www.mpi.govt.nz) or from this website
- If you are applying for a National Programme (NP) registration, you must choose your verifier. You will need a confirmation letter from your verifier to attach to this application. A list of recognised verification (or audit) agencies can be found on the MPI website, under 'registers and lists'. The law requires Councils to verify businesses registered under the template food control plan.
- If your business is a registered limited liability company, a copy of the company registration certificate. See [www.companies.govt.nz](http://www.companies.govt.nz)
- You need to make sure you can confirm that the operator of each food business is 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.
- If you were registered with either the Ministry for Primary Industries (MPI) or your local council before 1 March 2016, make sure you have your previous registration IDs on hand. These are IDs such as *FSA-JBIP-12345* or *WEBB-12345* or *LIC/FP/12345*
- Details of payment of your application fee.
- Multi sites - Multi-site means there is more than one address where food is traded, and you would like to register all sites under one application. If you operate one or more sites within Clutha District Council area, you must register with that council otherwise you need to contact MPI. Make sure you have registration information for every address where food is traded by completing the FAA-02 Multi-site form or a spreadsheet of the sites' information attached to your application is acceptable.

## Collection of Information

### Collection of Personal Information

Pursuant to Principle 3 of the Privacy Act 1993, we advise that:

- This information is being collected for the purpose of registering under the Food Act 2014; and
- The recipient of this information, which is the agency that will collect and hold the information, is Clutha District Council, PO Box 25, Balclutha, 9240.
- Some of the information collected will be displayed on the Ministry of Primary Industries public register; and
- The collection of information is authorised under section 53 or section 83 of the Food Act 2014, whichever applies. The provision of this information is necessary in order to process an application for registration under either section 53 or section 83; and
- The supply of this information is voluntary; and
- Failure to provide the requested information is likely to result in a return of this application form to the applicant, and may ultimately result in a refusal to register, in accordance with section 54 and 57 or section 84 and 87, of the Food Act 2014, which ever applies; and
- Under Principles 6 and 7 of the Privacy Act 1993, you have the right of access to, and correction of, any personal information that you have provided.

### Collection of Official Information

- All information provided to the Clutha District Council is official information and may be subject to a request made under the Local Government Official Information and Meetings Act 1987.
- If a request is made under that Act for information you have provided in this application, the Clutha District Council must consider any such request in accordance with its obligations under the Local Government Official Information and Meetings Act 1987 and any other applicable legislation.

## **Food Control Plan information:**

### **Where can I get a copy of a template Food Control Plan?**

You can download an electronic version of FCP from the MPI website: [www.mpi.govt.nz/food-safety/food-act-2014/forms-and-templates](http://www.mpi.govt.nz/food-safety/food-act-2014/forms-and-templates)

Clutha District Council can provide printed templates and diary pages at a cost.

### **Once I register what happens next?**

For a new business, a Clutha District Council EHO will come and verify your FCP within 6 weeks of your registration being approved.

For existing food businesses transitioning to FCP, the verification will take place within one year of your registration being approved. Verifications will have three possible outcomes; Acceptable, Unacceptable and Non-Compliance.

The EHO will look at the Food Control Plan and talk to you and your staff to gather evidence that you are following what you have said in your plan and to see you are preparing safe and suitable food consistently.



Clutha District Council  
 1 Rosebank Terrace, PO Box 25, Balclutha, 9240  
 Phone: 0800 801 350 Email: [help.desk@cluthadc.govt.nz](mailto:help.desk@cluthadc.govt.nz)  
 Website: [www.cluthadc.govt.nz](http://www.cluthadc.govt.nz)

FAA-01

May 2018

**APPLICATION FOR REGISTRATION  
 FOOD ACT 2014**

**1. What type of registration are you applying for?**

Single site  Multi-site – **also** need to complete FAA-02 form

|                                   |  |
|-----------------------------------|--|
| <b>Risk Based Measure (RBM) :</b> | <input type="checkbox"/> Template Food Control Plan<br><input type="checkbox"/> National Program 3<br><input type="checkbox"/> National Program 2<br><input type="checkbox"/> National Program 1 |
|-----------------------------------|--|

If you were registered before 1 March 2016, what was your registration ID number? (Get this from your current certificate)

**If this is for a new business – what is the proposed opening date:** \_\_\_\_\_ **Please note : You cannot start operating until you are registered.**

**2. Who is the operator of the food business?**

The operator is the owner or other person in control of the business. If Multi site - the operator responsible for the RBM

|   |  |                        |  |
|---|--|------------------------|--|
| <b>Legal Name(s) of Operator</b><br><i>(name to appear on certificate)</i>  | <input type="checkbox"/> registered company <input type="checkbox"/> partnership <input type="checkbox"/> individual/Sole Trader |                        |  |
| <b>NZ Business Number</b><br>see <a href="https://www.business.govt.nz/companies">https://www.business.govt.nz/companies</a>  |  |                        |  |
| <b>Operator Address and Contact Details</b><br>You must provide this information to be registered. However, if the address is a dwelling house, you may ask that the address is withheld from the public register by ticking the box below.           |  |                        |  |
| <b>Postal Address</b>   | <input type="checkbox"/> This address is a private dwelling house and I wish it to be withheld from the public register.         |                        |  |
| <b>Day-to-day manager</b><br>The person who has the overall responsibility to make sure the RBM is being followed, receives communications about your registration (sending approval documents and renewal reminders). Contact CDC if details change. |  |                        |  |
| <b>Operator day-to-day manager</b>  | <b>Name</b>  |                        |  |
|   | <b>Position</b>  |                        |  |
| <b>Mobile</b>   |  | <b>Other phone no.</b> |  |
| <b>Email</b><br>By entering an email address you consent to being sent information and notifications electronically, if required.   |  |                        |  |

**Office Use Only**

|                   |                 |  |
|-------------------|-----------------|--|
| Area Office Stamp | Licence No:     |  |
|                   | Ernie File : qA |  |
|                   | Lodgement Fee : |  |
|                   | Date Paid:      |  |
|                   | Receipt No:     |  |

Premises ID:  
 MAPS ID:  
 Parcel ID:  
 Approval Date:  
 Expiry Date:

|  |  |
|--|--|
| <b>3. Physical Site of Food Business</b>   |  |
| <input type="checkbox"/> Single Site – complete details below      (or) <input type="checkbox"/> Multi-site businesses – Complete FAA-02 Multi-Site Details form |  |
| <b>Trading Name, (ie 'Trading As')</b>   |  |
| <b>Street Address of Premises</b>  | <input type="checkbox"/> This address is a private dwelling house and I wish it to be withheld from the public register. |
| <b>Trading Hours</b>   |  |
| <b>Vehicle Registration number (Mobile businesses only)</b>  |  |

#### 4. Who will be doing your verification?

|  |   |
|--|---|
| <b>Template FCP - CDC</b>  | <input type="checkbox"/> MPI Template Simply Safe and Suitable                            |
| <b>National Programme<br/>Insert name of verification agency</b> | <input type="checkbox"/> I have attached a confirming letter from my verification agency. |

#### 5. Scope of operations

**Attached completed "scope of operations" document for your business?**

If your business changes in any way you must notify Clutha District Council, Environmental Health team to update the scope of operations.

#### Applicant Statement

|  |  |                  |  |
|--|--|------------------|--|
| I confirm that:  |  |                  |  |
| 1. I am authorised to make this application; and   |  |                  |  |
| 2. The information supplied in this application is truthful and accurate to the best of my knowledge and belief; and   |  |                  |  |
| 3. Neither I nor any Directors, Partners or Managers of the business concerned have been convicted, whether in New Zealand or overseas, of any offence relating to fraud or dishonesty, or relating to management, control or business activities in respect of businesses of a kind (whether in New Zealand or elsewhere) that are regulated under the Food Act 2014. |  |                  |  |
| I also confirm that:   |  |                  |  |
| 4. I am authorised to make this application on behalf of the operators listed in section 3; and  |  |                  |  |
| 5. Every operator of the food businesses covered by the Food Control Plan or National Programme is 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  |  |                  |  |
| 6. Every operator of the food businesses covered by the Food Control Plan or National Programme is able to comply with the requirements of the Food Act 2014.  |  |                  |  |
| <b>Name</b>  |  | <b>Job Title</b> |  |
| <b>Signature</b>   |  | <b>Date</b>      |  |

#### Final check before sending your application to Clutha District Council

|                          |  |
|--------------------------|--|
| Have you:                |  |
| <input type="checkbox"/> | Filled this form in completely and legibly?  |
| <input type="checkbox"/> | Attached the completed scope of operations document?   |
| <input type="checkbox"/> | If Multi Site – Also completed a FAA-002 Multi-site details form   |
| <input type="checkbox"/> | Attached a letter from your verifier if that is not Council?   |
| <input type="checkbox"/> | Attached copies of company registration certificates if you have a registered limited liability company? |
| <input type="checkbox"/> | Read and signed the Applicant Statement?   |
| <input type="checkbox"/> | Included fee payment for this application?   |

**Payments can be made by bank deposit, or payment with application**

**Bank Account:** 03 1734 0061851 02

**Reference:** RBM followed by trading name ie RBM Bob's Burgers

**Registration fee:** Current fee can be found on Council website's Fees & Charges page