

### COONAMBLE SHIRE COUNCIL

## NOTIFICATION OF MOBILE FOOD VENDING VEHICLE FORM (PRIVATE LAND)

Personal information collected as a result of this application will only be used for the purpose of assessing eligibility under Council's Mobile Food Vending Vehicle Policy and will not be used for any other purpose, or disclosed to any person, unless required by law to do so, or authorised to do so by the person to whom that personal information relates. Privacy will be maintained in accordance with the *NSW Privacy and Personal Information Protection Act 1998*.

**USING THIS FORM:** Council requires all mobile vending vehicles trading in accordance with the provisions of the *State Environmental Planning Policy (Exempt and Complying Development Codes) 2008* on private land are to notify Council at least 2 business days prior to their intended trading.

#### APPLICANT DETAILS (Must be mobile food vending vehicle owner)

<b>Salutation: (please tick)</b>	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Other
<b>First Name:</b>				<b>Surname:</b>	
<b>Street Address:</b>					
<b>Suburb:</b>				<b>Postcode:</b>	
<b>Postal Address: (if different to street address)</b>					
<b>Phone No:</b>				<b>Mobile:</b>	
<b>Email:</b>					

#### MOBILE FOOD VENDING VEHICLE DETAILS

<b>Vehicle registration:</b>		<b>State registered:</b>	
<b>Type of vehicle:</b>			
<b>Insurance information (Policy number)</b>		<b>Insurance information (Type)</b>	
<b>Council area/name where Food Business is registered:</b>			

### P. 2 - NOTIFICATION OF MOBILE FOOD VENDING VEHICLE FORM (PRIVATE LAND)

#### OPERATING DETAILS (where the vehicle will be parked and trading)

<b>Street Address:</b>		<b>Suburb:</b>	
<b>Lot and DP (if known):</b>			
<b>Owner of property First Name:</b>		<b>Owner of property Last Name:</b>	
<b>Signature of landowner consent:</b>			
<b>Date(s) of operation:</b>		<b>Operating times: (start and finish)</b>	

#### FOOD SAFETY – FOOD SAFETY SUPERVISOR (FSS)

<b>FSS Certificate Name:</b>	
<b>FSS Certificate Number:</b>	
<b>FSS Certificate Expiry:</b>	
<b>Type of Food and Drinks:</b>	
<b>Mobile Food Vending Vehicle:</b> <b>Category 1</b> (low risk) <b>Category 2</b> (medium to high risk, separate kitchen, or mobile kitchen)	<input type="checkbox"/> <b>Category 1</b> <input type="checkbox"/> <b>Category 2</b>

#### NOTIFICATION CONFIRMATION

I/We \_\_\_\_\_ authorise

(Applicant's name)

- Coonamble Shire Council to contact the Council in which the mobile food vending vehicle is registered as a food business.

I/We understand that this notification, once signed, declares that I must adhere to all the requirements under Council's Mobile Food Vending Vehicle Policy and the Council's procedure for Mobile Food Vending Vehicle, Food Act 2003, the State Environmental Planning Policy (Exempt and Complying Codes) 2008 and all other relevant legislation that is applicable to the operations of my business.

I/We understand that this notification is for the operation of the mobile food vending vehicle at the location listed above and does not relate to any operations not outlined in this notification.

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