

NOTIFICATION OF A FOOD SAFETY SUPERVISOR

After appointing a Food Safety Supervisor (FSS), the proprietor (business owner) of a food business must notify Warrumbungle Shire Council of their FSS within 7 days.

The proprietor can meet this obligation by filling in this notification form and submitting it to Warrumbungle Shire Council.

Section 1

Food Business Details	
Proprietor / Company Name	
Trading Name	
Contact Person	
Contact Number	
Email	
Postal Address	
Is this business a Mobile Food Vehicle? <input type="checkbox"/> Yes If Yes, please complete the Business Address <input type="checkbox"/> No	
Food Premises Address	
Business Address (where Mobile Food Vehicle is usually kept)	

Section 2

Business Authorisation			
The proprietor of the food business should fill in the authorisation below:			
Proprietor authorisation			
If any business information supplied by me may be considered to be untrue or misleading in any respect, I understand that Warrumbungle Shire Council may take such action as it believes necessary, including the disclosure of the information to any person or body the Authority considers has a legitimate interest in receiving it, and I consent to such disclosure.			
Name		Name	
Signature/s		Date	

Section 3

Food Safety Supervisor's details	
Tick appropriate box <input type="checkbox"/> New FSS <input type="checkbox"/> Existing FSS (change of details)	
FSS Name	
FSS Contact Number (during FSS working hours)	
FSS Email	

Food Safety Supervisor Certificate Details	
RTO Name	
Certificate Identification Number	
Date of Issue	

Section 4

Fill in Section 4a OR Section 4b, whichever is applicable

4a) If an employee is the FSS:

FSS authorisation

I authorise my employer _____ (business name) to provide my personal information to the relevant enforcement agency for the purposes of S106E of the *Food Act 2003* (NSW). This authorisation is limited to the provision of my name, contact details and Food Safety Supervisor certificate details (including identification number and date issued).

If any information supplied by me may be considered to be untrue or misleading in any respect, I understand that the Warrumbungle Shire Council may take such action as it believes necessary, including the disclosure of the information to any person or body the Authority considers has a legitimate interest in receiving it, and I consent to such disclosure.

Name		Name	
Signature/s		Date	

OR

4b) If the proprietor of the business is the FSS:

FSS authorisation

I acknowledge and understand that I am providing my personal information to the relevant enforcement agency for the purposes of s106E of the *Food Act 2003* (NSW). This authorisation is limited to the provision of my name, contact details and Food Safety Supervisor certificate details (including identification number and date issued).

If any information supplied by me may be considered to be untrue or misleading in any respect, I understand that the Warrumbungle Shire Council may take such action as it believes necessary, including the disclosure of the information to any person or body the Warrumbungle Shire Council considers has a legitimate interest in receiving it, and I consent to such disclosure.

Name		Name	
Signature/s		Date	

