

Food Premises Advisory Inspection Application and Checklist 22/23

If you need help lodging your form, contact us		Office use only		
Email	council@northernbeaches.nsw.gov.au	Form ID	2050	
Phone	1300 434 434	TRIM Ref		
Customer Service Centres	Manly Town Hall, 1 Belgrave Street Manly NSW 2095	Dee Why Civic Centre, 725 Pittwater Road Dee Why NSW 2099	Last Updated	June 2022
	Mona Vale 1 Park Street Mona Vale NSW 2103	Avalon 59A Old Barrenjoey Road Avalon Beach NSW 2107	Business Unit	Environmental Compliance
		Application No.		
		Receipt No.		

Privacy Protection Notice	
Purpose of collection:	For Council to provide services to the community
Intended recipients:	Northern Beaches Council staff
Supply:	If you choose not to supply your personal information, it may result in Council being unable to provide the services you seek
Access/Correction:	Please contact Customer Service on 1300 434 434 to access or correct your personal information

About this form
<p>A Food Business advisory inspection can be requested by completing the relevant sections of this form and paying the Food Advisory Inspection Fee at Council.</p> <p>This form can be completed to request an inspection, prior to sale or purchase of a business, prior to occupation, or for the purpose of a fit-out consultation.</p> <p>Note: A new food business must submit a Food Business Owner Details Form to Council's Environmental Health Team and obtain a registration number prior to submitting this form.</p> <p>Fee: \$286</p> <p>How to complete this form</p> <ol style="list-style-type: none"> 1: Complete Part 1 and Part 10 only. 2: Please note that fields on this form marked with an * are mandatory and must be completed by the applicant before submitting the application. 3: Once completed you can submit this form by fax, mail or in person. Please refer to the Lodgement details section for further information. 4: This form is to be submitted along with payment of the food advisory inspection fee.

Part 1: Property Details* (mandatory fields)

Prior to sale/purchase inspection	Prior to occupation	Fit out consultation	Other
Food Business Trading Name			
DA Number (if applicable)		Council Registration Number	
Property Address		Street Name	
Suburb		Postcode	

Part 1b: Fees

Inspection fee	\$295
Select if applicable	
Urgency fee: 2 work days	\$265
Urgency fee: 3-10 work days	\$121

Part 3: Floors, Walls and Ceilings

Are the floor areas in the food preparation and storage areas smooth, impervious and easy to clean?	Yes	No	N/A
Is the floor coved at the intersection of the floors and walls?	Yes	No	N/A
Are there drainage points in the floor?	Yes	No	N/A
Is the cool room floor smooth, impervious and easy to clean material?	Yes	No	N/A
Are all wall openings for pipes vermin proof?	Yes	No	N/A
Are the ceilings of solid construction and smooth & impervious & easy to clean material free of gaps? (NOTE: drop in panels are not acceptable in food preparation areas)	Yes	No	N/A
Comments			

Part 4: Fixtures, Fittings and Equipment

Is there warm running water?	Yes	No	N/A
Are soap and paper towel dispensers located adjacent to hand wash basins?	Yes	No	N/A
Are the hand wash basins within 5m travel distance of food preparation and service areas?	Yes	No	N/A
Is there a double bowl sink or single bowl sink with dishwasher installed?	Yes	No	N/A
Is there a dedicated food preparation sink?	Yes	No	N/A
Is there a cleaner's sink?	Yes	No	N/A
Are all fridges/freezers and holding equipment commissioned and operational?	Yes	No	N/A
Is a working thermometer available at the premises?	Yes	No	N/A
Are the premises pest proofed, including external doors and windows?	Yes	No	N/A
Has fixtures and fittings been installed appropriately either on a plinth, moveable on wheels, or appropriately designed legs?	Yes	No	N/A
Are hand wash basins available for use in:	Yes	No	N/A
• Areas where open food is handled?	Yes	No	N/A
• In utensil / equipment washing areas?	Yes	No	N/A
• In toilet cubicles or immediately adjacent to toilet cubicle?	Yes	No	N/A
Do the hand wash basins have hands free taps?	Yes	No	N/A
Comments			

Part 5: Staff belongings and storage

Are there separate areas for chemical storage, such as a dedicated room or separate enclosed cupboard located away from food preparation areas?	Yes	No	N/A
Are separate storage facilities provided for employee's clothing and personal belongings?	Yes	No	N/A
Comments			

Part 6: Waste storage

Do you have a waste storage area?	Yes	No	N/A
Is there a water supply, hose and floor waste?	Yes	No	N/A
Is the waste room finished with smooth impervious materials?	Yes	No	N/A
Is the waste room ventilated?	Yes	No	N/A
Is a grease trap installed?	Yes	No	N/A
Are waste bins provided and a contract in place for waste collection?	Yes	No	N/A
Comments			

Part 7: Mechanical ventilation

Has the mechanical ventilation been certified as being installed in compliance with the BCA and AS 1668.1 & AS 1668.2 and any specific DA conditions?	Yes	No	N/A
Does the exhaust hood cover the equipment to be ventilated?	Yes	No	N/A
Comments			

Part 8: Cleaning

Has all building material been removed from the premises?	Yes	No	N/A
Has the premises been cleaned so that it is ready for trade?	Yes	No	N/A
Comments			

Part 9: Ensure the following are operational at the time of the Final Inspection

Is there warm 'running water'?	Yes	No	N/A
Are all the fridges and holding equipment commissioned and operational?	Yes	No	N/A
Are soap and paper towel dispensers located adjacent to hand wash basins?	Yes	No	N/A
Comments			

Part 10: Applicant Declaration* (mandatory fields)

I declare that the information provided on this form is accurate, complete and correct. I understand that this is an application and approval to operate is not guaranteed.			
Name			
Position			
Signature			
Date		Contact Phone Number	

Part 11: Council use

Does the layout conform to approved plans?	Yes	No	N/A
Have you reviewed all DA conditions to ensure all health related conditions have been addressed?	Yes	No	N/A

Officer Name	
Position	
Signature	
Date	

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Please charge my	<input type="radio"/> Mastercard	<input type="radio"/> Visa	<input type="radio"/> American Express
Amount	\$		

Name as appears on card																
Card Number																
Expiry Date																

Signature															
Daytime Phone Number															
Date															

Please note: All credit card payments are subject to a 0.5% service fee

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Application No.															

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