

**Event Management**

**EVENT FOOD SAFETY NOTIFICATION FORM**

The *Food Act 2001* and *Food Safety Standards* contain requirements for all food businesses (including not-for-profit organisations and community events) to meet. All Event Organisers conducting events in the District Council of Loxton Waikerie are required to complete and return this form if they plan to serve food at their event.

An information sheet is available which provides full details about food safety at special events.

This application **MUST** be **completed and submitted by 20 working days prior** to the proposed event/activity.

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| **Event Details** | | | |
| Event Name |  | Date(s) of event |  |
| Day(s) of event |  | Time(s) of event |  |
| Location of Event |  | | |
| Brief event description |  | | |

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| **Contact Details** | | | | | | | | | | | |
| Contact Person |  | | | | | | | | | | |
| Organisation |  | | | | | | | | | | |
| Postal Address |  | | | | | | | Postcode | |  | |
| Telephone |  | | | Mobile | |  | | Fax | |  | |
| Email |  | | | | | Web | |  | | | |
| **Food Stall Details (Stall 1)** | | | | | | | | | | | |
| Name of Proprietor | | |  | | | | | | | | |
| Address | | |  | | | | | | | | |
| Type of food being served | | |  | | | | | | | | |
| Contact Person | | |  | | Phone no | |  | | Mobile no | |  |
| Max number of food handlers at the stall | | | | |  | | | | | | |
| Food Business Notification (FBN) number  (If unknown, please contact Councils Environmental Health Officer on 85848000) This is a compulsory requirement | | | | | | |  | | | | |
| Public Liability Insurance  This is a compulsory requirement | | Yes  No  Please attach a copy of your certificate of currency to the event organiser. | | | | | | | | | |

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| **Food Stall Details (Stall 2)** | | | | | | |
| Name of Proprietor | |  | | | | |
| Address | |  | | | | |
| Type of food being served | |  | | | | |
| Contact Person | |  | Phone no |  | Mobile no |  |
| Max number of food handlers at the stall | | |  | | | |
| Food Business Notification (FBN) number  (If unknown, please contact Councils Environmental Health Officer on 85848000) This is a compulsory requirement | | | |  | | |
| Public Liability Insurance  This is a compulsory requirement | Yes  No  Please attach a copy of your certificate of currency to the event organiser. | | | | | |
| **Food Stall Details (Stall 3)** | | | | | | |
| Name of Proprietor | |  | | | | |
| Address | |  | | | | |
| Type of food being served | |  | | | | |
| Contact Person | |  | Phone no |  | Mobile no |  |
| Max number of food handlers at the stall | | |  | | | |
| Food Business Notification (FBN) number  (If unknown, please contact Councils Environmental Health Officer on 85848000) This is a compulsory requirement | | | |  | | |
| Public Liability Insurance  This is a compulsory requirement | Yes  No  Please attach a copy of your certificate of currency to the event organiser. | | | | | |
| **Food Stall Details (Stall 4)** | | | | | | |
| Name of Proprietor | |  | | | | |
| Address | |  | | | | |
| Type of food being served | |  | | | | |
| Contact Person | |  | Phone no |  | Mobile no |  |
| Max number of food handlers at the stall | | |  | | | |
| Food Business Notification (FBN) number  (If unknown, please contact Councils Environmental Health Officer on 85848000) This is a compulsory requirement | | | |  | | |
| Public Liability Insurance  This is a compulsory requirement | Yes  No  Please attach a copy of your certificate of currency to the event organiser. | | | | | |

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| **Food Stall Details (Stall 5)** | | | | | | |
| Name of Proprietor | |  | | | | |
| Address | |  | | | | |
| Type of food being served | |  | | | | |
| Contact Person | |  | Phone no |  | Mobile no |  |
| Max number of food handlers at the stall | | |  | | | |
| Food Business Notification (FBN) number  (If unknown, please contact Councils Environmental Health Officer on 85848000) This is a compulsory requirement | | | |  | | |
| Public Liability Insurance  This is a compulsory requirement | Yes  No  Please attach a copy of your certificate of currency to the event organiser. | | | | | |
| **Food Stall Details (Stall 6)** | | | | | | |
| Name of Proprietor | |  | | | | |
| Address | |  | | | | |
| Type of food being served | |  | | | | |
| Contact Person | |  | Phone no |  | Mobile no |  |
| Max number of food handlers at the stall | | |  | | | |
| Food Business Notification (FBN) number  (If unknown, please contact Councils Environmental Health Officer on 85848000) This is a compulsory requirement | | | |  | | |
| Public Liability Insurance  This is a compulsory requirement | Yes  No  Please attach a copy of your certificate of currency to the event organiser. | | | | | |

**Please return form to**

council@lwdc.sa.gov.au