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| Before you start, please 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). This will need to be attached to your completed application.  If you are applying for a National Programme (NP) registration, you can choose your verifier. You will need a confirming letter from your verifier to attach to this application. A list of recognised verification (or audit) agencies can be on the MPI website, under ‘registers and lists’. The law requires councils to verify businesses registered under the template food control plan.  A scale site plan, showing the layout fixtures and fittings in any food related area, and information on wall, floor and ceiling linings and essential services.  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 the food businesses 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.* | | | |
| 1. **What type of registration are you applying for?** | | | |
| *(Hint: You will know which type of registration after you have completed the Scope of Operations document.)*  MPI template food control plan: Food Service, Serve Safe and Specialist Retail  NP 3  NP 2  NP 1 | | | |
| 1. **If you were registered before 1 March 2016, what was your registration ID number?** | | | |
| Click here to enter text. | | | |
| 1. **What date do you propose to open or take over the business?** | | | |
| Click here to enter text. | | | |
| 1. **Who is the operator of the food business?** | | | |
| **Legal Name(s) of operator (eg: registered company, partnership or individual):**  Click here to enter text. | | | |
| I have attached a copy of the company name registration from the New Zealand Companies office ([www.companies.govt.nz](http://www.companies.govt.nz)) | | | |
| NZ Business Number: Click here to enter text. | | | |
| *If you have a New Zealand Business Number (NZBN), provide this. For more information about NZBN’s, including how to get one, see:* [*https://www.business.govt.nz/companies*](https://www.business.govt.nz/companies) | | | |
| **Trading Name**, if any (ie: ‘Trading As’): Click here to enter text.  *This is for the first or Main Site – (complete details over page for any subsequent site)* | | | |
| Same as legal name above | | | |
| 1. **Operator Address and Contact Details** | | | |
| *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.* | | | |
| **Postal Address:** | | | |
| Number/ PO Box/Street: Click here to enter text. | | | Suburb: Click here to enter text. |
| City: Click here to enter text. | | | Postcode: Click here to enter text. |
| This address is a private dwelling/house and I wish it to be withheld from the public register. | | | |
| **Physical / Courier Address:** | | | |
| Number/ PO Box/Street: Click here to enter text. | | | Suburb: Click here to enter text. |
| City: Click here to enter text. | | | Postcode: Click here to enter text. |
| This address is a private dwelling/house and I wish it to be withheld from the public register. | | | |
| 1. **Contact Person Details** | | | |
| *The contact details entered below will be used for communications about your registration, such as sending approval documents and renewal reminders. Contact Kāpiti Coast District Council if these details change.* | | | |
| Telephone: Click here to enter text. | | Mobile: Click here to enter text. | |
| Email: Click here to enter text..  *By entering an email address you consent to being sent information and notifications electronically, if required.* | | | |
| 1. **Operator day-to-day Manager** | | | |
| Name | | Position | |
| 1. **Who will be doing your verification?** | | | |
| Council | Other (insert name of verification agency): Click here to enter text.  I have attached a confirming letter from my verification agency. | | |
| 1. **Applicant Statement** | | | |
| I confirm that:   1. I am authorised to make this application as the operator or a person with legal authority to act on behalf of the operator; and 2. The information supplied in this application is truthful and accurate to the best of my knowledge and belief; and 3. The operator 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 4. The operator of the food business is able to comply with the requirements of the Food Act 2014. | | | |
| Name: Click here to enter text.. | | | Job Title: Click here to enter text. |
| Signature | | | Date Click here to enter text. |

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| Details for other addresses (sites) *(Hint: Add additional rows as necessary or attach a file (e.g. spreadsheet) to application email with all of the information required below.* | | | | | | | |
| **Legal name(s) of site operator (e.g. registered company, partnership or individual)** (This is for template food control plan registrations only. Tick box to confirm company registration certificate is attached for any limited liability companies) | | **NZ Business Number**  (where applicable) | **Site trading name, if any (i.e. ‘Trading As’):** | **Street/Physical Address (location of actual place)**  (Tick box if you wish the address to be withheld from the public register because it is a private dwellinghouse) | | **Vehicle Registration numbers (mobile businesses only)** | **Site day-to-day manager and position** |
| E.g. ABC Foods Limited |  |  | E.g. Yummy CakesRUs, Wellington Store | E.g. 123 Cakes Road, Faketown 1234 |  |  | E.g. Store Manager |
| Click here to enter text. |  | Click here to enter text. | Click here to enter text. | Click here to enter text. |  | Click here to enter text. | Click here to enter text. |
| Click here to enter text. |  | Click here to enter text. | Click here to enter text. | Click here to enter text. |  | Click here to enter text. | Click here to enter text. |
| Click here to enter text. |  | Click here to enter text. | Click here to enter text. | Click here to enter text. |  | Click here to enter text. | Click here to enter text. |

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| 1. **Final check before lodging your application** |
| Have you:  Filled this form in completely and legibly?  Attached the completed the scope of operations document?  Attached plan and fit-out details for all sites?  Attached a letter from your verifier if that isn’t Council?  Attached copies of company registration certificates?  Completed the site details for all sites  Read and signed the Applicant Statement?  Paid the registration fee and MPI food business levy? |

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| 1. **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. * The recipient of this information, which is the agency that will collect and hold the information, is Kāpiti Coast District Council. * A copy of this information will also be provided to and held by MPI, PO Box 2526, Wellington 6140. * Some of the information collected will be displayed on a public register. * The collection of information is authorised under section 53 or section 83 of the Food Act 2014, which ever applies. The provision of this information is necessary in order to process an application for registration under either section 53 or section 83. * The supply of this information is voluntary. * 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. * 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 Kāpiti Coast District Council is official information and may be subject to a request made under the Local Government Official Information and Meetings Act 1987 (LGOIMA). * If a request is made under LGOIMA for the information you have provided in this application, Kāpiti Coast District Council must consider any such request in accordance with its obligations under LGOIMA and any other applicable legislation. * All information provided to the Ministry for Primary Industries is official information and may be subject to a request made under the Official Information Act 1982. * If a request is made under the Official Information Act for information you have provided in this application, the Ministry for Primary Industries must consider any such request in accordance with its obligations under the Official Information Act 1982 and any other applicable legislation. |