## **Premise change of details form - Food Act**

Food Act 1984



| Proprietor details   |
|--|
| I/we (proprietor):   |
| Of (former premise name and postal address):   |
|  |
|  |
| Phone:   |
| Amendment request to current registration:   |
| Request that the following details be amended for the Food Act registration of the premise mentioned above:  |
| New Trading name:  |
| New Postal Address:  |
|  |
| Email:   |
| Primary Contact/Food Safety Supervisor:  |
| Contact Number:  |
| Type, activities or class: (write details below)   |
| □ Class 1 □ Class 2 □ Class 3  |
|  |
|  |
|  |
|  |
| Renovations / Alteration to an existing premise:   |
| If renovations are being undertaken on the premises where food is prepared, handled, stored submit a copy of the floor plan for a free assessment. |
| Signature:   |
| Date:  |
|  |

In person: 20 Siding Ave, Officer
Post: P0 Box 7, Pakenham 3810

**Fax:** 03 5941 3784 – write 'Attention: Health' on the front of application

Email: mail@cardinia.vic.gov.au
Website: www.cardinia.vic.gov.au