



Application for Registration of Single-Site Food Business

Food Act 2014

TYPE OF REGISTRATION

MPI Template Food Control Plan

National Programme 3

National Programme 2

National Programme 1

OPERATOR OF THE FOOD BUSINESS

Legal name(s) of operator

I have attached a copy of the company name registration from the New Zealand Companies office (www.companies.govt.nz)

NZ business number

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>

Trading name

Same as legal name above

OPERATOR ADDRESS AND CONTACT DETAILS

PHYSICAL ADDRESS	POSTAL ADDRESS (if different to physical address)
Address	Address
Town/City	Town/City
Postcode	Postcode
Country	Country

This address is a private dwellinghouse and I wish it to be withheld from the public register.

This address is a private dwellinghouse and I wish it to be withheld from the public register.

CONTACT PERSON DETAILS

Mobile

Other telephone no.

Email

Operator day-to-day manager name and position

Name

Position

WHO WILL BE DOING YOUR VERIFICATION?

Council

Other – please specify

I have attached a confirming letter from my verification agency.

SCOPE OF OPERATIONS

Scope of operations attached?

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.
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

Job title

Signature

Date

Day

Month

Year