

# Request for 2nd Party Audit of a Food Safety Program

2023/24 Financial Year

## ***Food Act 2006***

I / we request a 2<sup>nd</sup> party audit of a food safety program.

**IMPORTANT:** The food business must be licensed with Logan City Council and have a current accredited food safety program.

## **Section 1 - Licensee Details**

Food business licence number: PH/FSDM/

Licensee name:

Trading as:

Site address:

Postal address (if different):

Contact person:

Business phone number:

Mobile phone number:

Email address:

**IMPORTANT:** By providing your email you are agreeing to receive all correspondence electronically including licensing renewal information, letters, inspection reports, legal notices and other licensing related information.

**PRIVACY COLLECTION NOTICE:** Council is collecting your personal information to be able to provide services and information in accordance with the *Food Act 2006*. It may be used to update records, contact you about Council business, including by mail, email or SMS and can only be accessed by Councillors, Employees and Authorised Contractors. To unsubscribe or opt out of electronic correspondence, please email your request to [council@logan.qld.gov.au](mailto:council@logan.qld.gov.au). All information is handled in accordance with Council's Privacy Policy and Procedure Visit: <https://www.logan.qld.gov.au/information-and-privacy/privacy>.

## Section 2 – Certification

Certification	Applicant 1	Applicant 2
I am authorised to sign on behalf of the person (meaning a corporation or individual/s) and commit this person (meaning a corporation or individual/s) in all respects.	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
The information supplied is correct to the best of my knowledge or that I could reasonably obtain.	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO




Applicant 1	Applicant 2
Name in full:	Name in full:
<b>Applicant signature:</b>	<b>Applicant signature:</b>
Date:	Date:
Position:	Position:

## Section 3 - Fees (Not subject to GST)

Your application cannot be processed unless the correct fees are paid in full.

Application type	Fee
2 <sup>nd</sup> party audit of a food safety program	\$ 570.00
If the audit goes for over 5 hours an additional hourly fee may be charged, which will be invoiced separately	\$70.00 per hour or part thereof

### PAYMENT OPTIONS

	<b>Paying by mail</b>	Make your cheque or money order payable to Logan City Council. Complete the application form and return it to Council.
	<b>Paying by phone</b>	Call Logan City Council on 07 3412 3412 to pay with Mastercard or Visa. Ensure you also return the signed application form to Council. A merchant surcharge fee of 0.34% will apply.
	<b>Paying in person</b>	Cash, cheque, money order, EFTPOS, Mastercard or Visa. Ensure you also return the signed application form to Council.
	<b>Customer service centre locations</b>	<b>Council Administration Centre</b> 150 Wembley Road, Logan Central <b>Beenleigh</b> - 105 George Street, Beenleigh <b>Jimboomba</b> - 18-22 Honora Street, Jimboomba