



# Mobile Food Vending Vehicle Application

Section 68 of the Local Government Act 1993

## OFFICE USE ONLY

Application No:	<input type="text"/>	CCO:	<input type="text"/>
Fees paid:	\$ <input type="text"/>	Receipt no:	<input type="text"/>
		Receipt date:	<input type="text"/>

## LODGEMENT & PAYMENT OF APPLICATION

**Your application will NOT be processed until FULL payment has been received.**

**Council:** Monday-Friday, 8:00am-4:30pm – **Payment by Cash, Cheque or Card**  
**Auburn Service Centre** - 1 Susan Street, Auburn NSW 2144  
**Merrylands Service Centre** - 16 Memorial Avenue, Merrylands NSW 2160

**Mail:** The General Manager, Cumberland City Council, PO Box 42, Merrylands NSW 2160  
**Payment by cheque ONLY - payable to Cumberland City Council**

**Email:** [council@cumberland.nsw.gov.au](mailto:council@cumberland.nsw.gov.au)

## Important Information

This form should be used to apply for approval under Section 68 of the Local Government Act 1993 to operate a mobile food vending vehicle **on Council owned land** within the Cumberland City Council Local Government Area.

If you wish to trade on private property only – please complete Council's 'Temporary Food Premises Registration Form' instead.

The form must be submitted at least 28 days prior to commencing trade.

## Type of Application

<input type="checkbox"/>	New
<input type="checkbox"/>	Renewal. Please advise your approval number: <input type="text"/>

## Applicant details

Trading Name:	<input type="text"/>		
Business Owner Name:^	<input type="text"/>		
<i>^Note: This must be an individual's name (sole trader) OR a corporation name (e.g. XYZ Pty Ltd). If the business is a trust, you must provide the trustee name</i>			
Business ABN:^^	<input type="text"/>		
<i>^^Note: If the business is a trust, you must provide the trustee name/ABN as well</i>			
Contact Person:	<input type="text"/>		
Contact Phone:	<input type="text"/>	Mobile:	<input type="text"/>
Email:	<input type="text"/>		

**Address for service of correspondence (including Notices and Letters)**

Business Owner Name: ^

Address: Unit no:  House no:

Street:

Suburb:  Postcode:

**^Note:** This must be an individual's name (sole trader) OR a corporation name (e.g. XYZ Pty Ltd)

**Vehicle Details**

Vehicles Owners Name: ^

Vehicle Make:  Vehicle Model:

Registration No:  Registration Expiry Date:

Address where vehicle is garaged:

Unit no:  House no:

Street:

Suburb:  Postcode

**^Must match the name of the applicant and the person/company on the insurance documents**

**Mobile Food Vending Category**

Please indicate the mobile food vending category you are applying for (select one option only):

Category	Business Activities Covered	Annual Fee <sup>^</sup>
<input type="checkbox"/> Category 1 – Food Vans	<ul style="list-style-type: none"> <li>Approval for low risk food activities only</li> <li>Business that handle food and drinks that do not require further preparation, or involve only the frothing of milk for coffee, preparation of milkshakes, or serving of frozen dairy products (<i>Note: soft serve ice-cream is considered potentially hazardous and falls under Category 2 below</i>)</li> <li>Food that is pre-packaged or is sold directly from its original package and does not require heating</li> </ul>	\$587
<input type="checkbox"/> Category 2 – Food Trucks	<ul style="list-style-type: none"> <li>Approval for all other food activities that are not considered low risk under Category 1</li> <li>Businesses that handle/prepare/cook foods that are potentially hazardous (require temperature control) such as burgers, sushi, sandwiches/rolls/wraps, vegetable curries, fried chicken, cooked rice, cooked pasta, sliced fruit, salads, etc.</li> </ul>	\$1170

**^The annual fee is payable upon approval of the application. It covers the cost of the approval and one inspection of the vehicle. Fee is based on Council's Fees and Charges 21/22**

### Checklist

Please tick all applicable boxes to indicate that you have attached copies of the documents with this application  
**Note:** Failure to supply the required documents will result in the application being rejected.

Applicant (please tick)	Document	Office Use Only – CCO
	RMS vehicle registration	
	Certificate of Currency of third party property damage insurance to the value of \$20,000,000	
	Certificate of Currency for public and product liability insurance to the value of \$20,000,000	
	Operational plan of management	
	Vehicle layout plan <i>(not required for renewal applications if no changes to the layout have been made)</i>	
	Proposed menu or list of foods to be sold from the vehicle	
	A copy of the Food Safety Supervisor (FSS) certificate <i>(required for Category 2 applications only)</i>	
CCO Initials:		

### Applicant Declaration

By signing this application, you certify that the above information and the information on any attachments, to the best of your knowledge, is true and correct.

Business Owner's signature:  Date:

### Privacy and Personal Information Protection Notice

#### Purpose of Collection

To register mobile food vending vehicle food business in the Council area. To contact the business as needed, to provide or request information.

#### Intended Recipients

Council staff and approved contractors of Cumberland City Council.

#### Supply

Mandatory. A mobile food vending application is required for the regulation of mobile food vending vehicles. A food business must register as per legislation.

#### Access/Correction

Contact Cumberland City Council Customer Experience Team to access or correct this information.

#### Storage

Cumberland City Council – 16 Memorial Avenue, Merrylands NSW 2160.