# Mutual Recognition Model Form – Plan of Management

#### 2A Plan of Management for mobile food businesses

##### Applicant details

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| Section | Details |
| Applicant title | Mr  Ms  Mrs Other: |
| Applicant name | First name: Surname: |
| Address | Unit/street No: Street name:  Suburb/town: State: Postcode: |
| Contact Information | Phone: Email: |
| Business details  (if applicable) | Business name: ABN: |
| Postal address  (if different from above) | Unit/street No: Street name:  Suburb/town: State: Postcode: |

##### Food business details

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| Section | Details |
| Food equipment type | Food truck  Food stall  Food van  Other (please specify): |
| Vehicle details | Vehicle make: Vehicle model:  Registration number: State: |
| Food business notification | Have you notified Council of your intention to operate a food business by submitting a food business notification?  Yes (please attached proof of notification)  No |
| Description of food and beverages sold | Provide details of the products sold and/or served and attach a copy of any menus to the application.  Response: |
| Proposed hours of operation | Provide details of the proposed hours of operation associated with the business activity including days/hours and duration.  Response: |
| Proposed locations of operation | Provide details of the proposed locations in which the business operates.  Response: |

##### Business activity and impact

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| Section | Details |
| Business description | Describe in detail your business activity, including the products or services offered and how they will be served (such as takeaway, eat on site).  Response: |
| Customer interaction | How will customers access your products? Describe any seating, ordering methods or other systems.  Response: |
| Waste management | Explain how you minimise environmental impact through effective waste management including recycling. Alternatively, attach a copy of waste management plans.  Response: |
| Community impact | Describe how your business ensures minimal disturbance and impact on the public, residents and other businesses.  Response: |
| Noise control | Describe noise-generating equipment used (e.g. generators, cooking, music) and methods used for managing this noise.  Response: |
| Staff rosters and responsibilities | Provide a description of number of staff involved in operations, roles and responsibilities.  Response: |
| Utility needs | Describe any utility requirements for your business (e.g. power, water, water disposal).  Response: |
| Incident management | Explain how any incidents (e.g. injuries, complaints) will be documented and reported. Alternatively, attach a copy of emergency/incident plans.  Response: |
| Set-up/Pack-up | Explain how you will set-up, pack-up and leave the site in good condition after operation.  Response: |

##### Mobile food premises layout and dimensions

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| Section | Details |
| Details of mobile food business layout and dimensions | Provide details of the layout and equipment used in relation to your food vehicle including dimensions. A layout plan may be provided or photos of the food premises along with details of dimensions below  Response: |

* 1. **Layout Plan**: Your layout plan can be hand-drawn, or computer generated, if drawn by hand, ensure it is neat, legible and to scale. Include a brief description or legend to assist with identifying specific areas and overall dimensions as well as individual area dimensions.
  2. **Photos:** If you are providing photos, ensure all sides of the food vehicle are illustrated along with key customer service areas and internal workspaces.

##### Attachment checklist

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| Section | Details |
| Required Attachments for Food Businesses  (copies of originals are acceptable) | Layout Plan, Dimensions and Photos  Public Liability Insurance Policy  Menu (if applicable)  Vehicle Registration and CTP insurance (if applicable)  Copies of Council Food Business Notifications |

##### Council assessment (office use only)

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| Section | Details |
| Application Checklist (select one) | Applicant has provided all required details  Applicant has provided insufficient information |
| Issuing Council and Officer | Council name: Officer name: |
| Record number | Council reference: |