

Mutual Recognition Model Form – Plan of Management

2A Plan of Management for mobile food businesses

Applicant details

Section	Details
Applicant title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> 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

Section	Details
Food equipment type	<input type="checkbox"/> Food truck <input type="checkbox"/> Food stall <input type="checkbox"/> Food van <input type="checkbox"/> 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? <input type="checkbox"/> Yes (please attached proof of notification) <input type="checkbox"/> No

Section	Details
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

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:

Section	Details
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

Section	Details
Details of mobile food business layout and dimensions	<p>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</p> <p>Response:</p>

- **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.
- **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

Section	Details
<p>Required Attachments for Food Businesses</p> <p>(copies of originals are acceptable)</p>	<p><input type="checkbox"/> Layout Plan, Dimensions and Photos</p> <p><input type="checkbox"/> Public Liability Insurance Policy</p> <p><input type="checkbox"/> Menu (if applicable)</p> <p><input type="checkbox"/> Vehicle Registration and CTP insurance (if applicable)</p> <p><input type="checkbox"/> Copies of Council Food Business Notifications</p>

Council assessment (office use only)

Section	Details
Application Checklist (select one)	<p><input type="checkbox"/> Applicant has provided all required details</p> <p><input type="checkbox"/> Applicant has provided insufficient information</p>
Issuing Council and Officer	<p>Council name: _____ Officer name: _____</p>
Record number	Council reference: _____