

**APPLICATION FOR VOLUNTARY SUSPENSION OF REGISTERED FOOD CONTROL PLAN**

(under section 64 of the Food Act 2014)

Complete the form below and email to: [food@kapiticoast.govt.nz](mailto:food@kapiticoast.govt.nz)

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| Registration Number | **FP** | Food Act Registration Number:  (Located on the Registration Certificate) | **KCD** |
| Business Legal Name: | |  | |
| Business Trading Name: | |  | |
| Business Postal Address: | |  | |
| Business Trading Location: | |  | |
| Mobile Food Van Registration Number: | |  | |

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| **Voluntary suspension**  Businesses operating registered food control plans may voluntarily suspend their registration for a minimum of 3 months, and a maximum of 12 months, under section 64 of the Food Act 2014. |
| I wish to suspend the registration in relation to the registration ID referred to above:  From: \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ (dd/mm/yy) To: \_\_\_\_\_/\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_ (dd/mm/yy)  I wish to suspend the following operations (tick one):  All operations; or  Certain operations as described below (or attach additional pages)  Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **NB:** *Please be aware that this voluntary suspension does not alter your registration expiry date (which is listed on your registration certificate). It is your responsibility to ensure that you renew your registration prior to this date regardless of whether or not you are trading.* |