APPLICATION FOR APPROVAL TO OPERATE A FOOD STALL AT AN EVENT



**Send, email or deliver your application to:**  
Food Licensing Officer

Kāpiti Coast District Council   
Private Bag 60601, Paraparaumu 5254  
175 Rimu Road, Paraparaumu 5032  
Telephone (04) 296 4700, Toll Free: 0800 486 486

licence.application@kapiticoast.govt.nz

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| --- | --- | --- |
| 1. **Name and Date/s of Event** | | |
| **Event Name:** | | |
| **Dates you will attend the event:** | | |
| 1. **Are you a currently registered food business** | | |
| If yes, you must attach a current certificate of registration if you are not registered in the Kapiti Coast District   * Yes Trading Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * I have attached a copy of my current certificate of registration | | |
| 1. **Are you a fundraising food stall or a person wanting to sell food once this year** | | |
| * Charitable or Fundraising food stall * Unregistered food operator who wants to sell food once in one year   Have you sold food at any other events in the last 12 months, if yes - how many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| 1. **Who is the operator of the food stall or registered mobile food business?** | | |
| Legal Name(s) of operator (e.g. registered company, partnership or individual): | | |
| Trading Name, if any (i.e. ‘Trading As’): | | |
| 1. **Operator Address and Contact Details** | | |
| Email Address: | | |
| Phone Number: | | |
| Physical / Courier Address: | | |
| Postal Address: | | |
| 1. **What food handling activities will you be conducting on site, tick all that apply:** | | |
| * Sale of manufacturer packaged shelf stable food (packaged nuts, snack foods, preserves, oils etc) * Sale of manufacturer packaged refrigerated or frozen food (ice creams, ice blocks, milk products etc) * Sale of coffee or other beverages * Sausage Sizzle * Sale of Cakes, Biscuits or preserves * Free Tastings | * Preparation or handling of readily perishable food * Cooking of food * Hot Holding of food * Heating of pre-prepared foods (pre-cooked curries, pies, etc) * Sale of packaged pre-prepared refrigerated food (such as salad, sushi, sandwiches, desserts) * Sale of raw meats, seafood, or chicken * Other (describe)   ---------------------------------------------------------------------------------------- | |
| 1. **Brief description of types of food to be sold** | | |
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| 1. **Describe what hand washing/utensil washing facilities you will provide (if you are not a registered mobile food business)**   **(minimum facilities for a one off food stall could include a 10L water container with a tap placed on a table with a bucket to catch waste water at ground level).** | | |
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| 1. **Applicant Statement** | | |
| I confirm that:   1. I am authorised to make this application as the operator or a person with legal authority to act on behalf of the operator; and 2. The information supplied in this application is truthful and accurate to the best of my knowledge and belief; and 3. The operator of the food business is able to comply with the requirements of the Food Act 2014 4. I understand that it is my responsibility to sell safe and suitable food. | | |
| Name: | | Job Title: |
| Signature | | Date |