

South Wairarapa District Council

Tel: (06) 3069611 • PO Box 6, Martinborough • www.swdc.govt.nz • health@swdc.govt.nz

FOOD STALL

(Application must be submitted at least 3 working days before the event)

Full Name/Comments N	Name.					
Full Name/Company N	vame:					
Trading Name:						
Postal Address:						
Email:						
Phone:						
Start Date:						
End Date:						
Stall Location:						
Stall Manager:						
The type of goods to						
be sold are:						
If food is being sold						
registered food	l husiness	(please provide curre	ent registration certif	icate)		
		er calendar year in N	_			
		re than 20 occasions		n N <i>7</i>)		
Please specify charity:		10 11011 20 000001				
Fee:	\$21.50					
Signature:	Ψ21.00					
Date:	+					
Date.						
Who to Contact for	Further	nformation?				
Hazel Turner						
Environmental Health Administrator						
06 306 9611 6						
health@swdc.govt.nz						
INSPECTORS APPR	ROVAL		,			
Date:			Inspector:			
Conditions:						
Expiry date:						



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	Kia Reretahi Tātau							
Source of Food (from where the food was obtained):								
1			L - C 1 (- L 1 (-	.1	it is all the investment of the			
Is any storage or preparation of the food to be undertaken after it is obtained by the operator of the food stall? Yes \square No \square								
If Yes – where and how will the storage or preparation of the food take place?								
			orago or proparation		ou take place.			
L								
Proposed m (Please include	Proposed method and Location of Food utensils, appliances and equipment: (Please include a floor plan showing all facilities and equipment)							
(*								
1								
What facilities	es are to be p	orovided	at the food stall:					
Table	YES \Box		Hot Storage (>60°C)	YES □	NO 🗆			
Hot Plate	YES NO		Cold Storage (<4°C)		NO 🗆			
BBQ	YES \Box		Wok	YES 🗆	NO 🗆			
_	YES D NO			YES□	NO □			
Oven		Ј Ш	Steamer	1E5 L	NO L			
Other (state)								
1								
1								
What arrang	ements have	heen m	ade for toilet use and	l washing	hands?			
Wilat allalig	joinonto navo	, been in	ade for tollet ase alle	wasiiiig	nanas.			
Please desc	rihe any huile	dina car	avan tent canony c	OVER SCR	en umbrella or other shelter facility			
Please describe any building, caravan, tent, canopy, cover, screen, umbrella or other shelter, facility or appliance to be used in conjunction with the stall:								
• •		•						