

## **South Wairarapa District Council**

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

# Form FA11FCP Change to Food Control Plan/National Programme under Food Act 2014

- This form must be used when:
  - Applying for registration of a significantly amended<sup>1</sup> template food control plan or national programme under section 45 of the Food Act 2014; such as adding a new place of food business, or a change to the scope of the food control plan or national programme that may have an effect on the safety and suitability of food; or,
  - Notifying of a non-significantly (minor) amended¹ template under section 45 of the Food Act 2014, such as a change in a type of food that is similar to an existing type of food identified in the food control plan or national programme; or
  - Notifying of a significant change in circumstances of a food control plan or national programme under section 51 of the Food Act 2014; or
  - Notifying of a voluntary suspension of a registered food control plan or national programme under section 64 of the Food Act 2014; or
  - Notifying of a surrender of registration of a food control plan or national programme under section 71 of the Food Act 2014.
  - If you are wanting to change your registration type from a food control plan, to a national programme, you need to complete a new application form for registration. If your application to register your business subject to a national programme is successful, you will need to surrender your food control plan registration.

### Before you start, let's check that you have everything you need:

- Your current Site registration number (SWRXXXXXX) from your registration certificate.
- For applications for registration of significantly amended<sup>1</sup> food control plans or national programmes:
   documentation to confirm significantly amended food control plan or national programme.
- If the change relates to your scope of operations, a description of how your business scope of operations has changed (clearly marked additions and/or deletions). Find more information, and the scope of operations form by visiting <a href="http://www.swdc.govt.nz/node/64">http://www.swdc.govt.nz/node/64</a>
- If your business has changed name, and is a registered limited liability company, a copy of the new company registration certificate. See <a href="https://www.companies.govt.nz">www.companies.govt.nz</a>
- If you are altering, changing, adding or removing addresses where food is handled, you need to make sure you have the address information on hand, and any new or changed site plans. A spreadsheet of the sites' information attached to your application is acceptable. You need to make sure you can confirm that every new or changed operator of the food businesses covered by the food control plan or national programme is resident in New Zealand within the meaning of section YD 1 or YD 2 (excluding section YD 2(2)) of the Income Tax Act 2007, and provide company registration certificates for any limited liability companies.
- Your application fee of \$100.

### Read these notes before you start filling out the form

- Information provided may be included on the public register. However you can ask for certain personal
  information to be withheld from the published register. You can view the public register here:
  <a href="http://mpi.govt.nz/food-safety/food-act-2014/">http://mpi.govt.nz/food-safety/food-act-2014/</a>, Registers & lists.
- Send the completed application form together with the fee and other requirements above to South Wairarapa District Council at the above address.
- If there are any changes to the details provided in this application after the application has been sent to South Wairarapa District Council, you must promptly inform us of the changes in writing.

<sup>&</sup>lt;sup>1</sup> To decide if your change is a significant amendment, call the Council, or see Food Notice: Food Control Plans and National Programmes at <a href="http://mpi.govt.nz/food-safety/food-act-2014/">http://mpi.govt.nz/food-safety/food-act-2014/</a>, Requirements, for more information.

If your businesses is a multi-site that has sites in different districts, please contact MPI https://www.mpi.govt.nz/food-safety/food-act-2014/forms-and-templates/ Change to Food Control Plan or National Programme under Food Act 2014 Question A: Do you want to surrender your registration? Yes → Complete Section 1 and Section 11 only. No → Go to Question B. Section 1. Surrender Notification of surrender of registration of a food control plan or national programme is required under section 71 of the Food Act 2014. I wish to surrender the registration in relation to the registration ID SWR\_ (dd/mm/yy) Make sure you also send a note to your nominated Recognised Verification Agency notifying them of the surrender. Question B: Do you want to voluntarily suspend your registration? Yes → Complete Section 2. No → Go straight to Question C. Section 2. **Voluntary Suspension** Businesses operating registered food control plans or national programmes 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 SWR\_ until the following date (must be a minimum of 3 months, and a maximum of 12 months): (dd/mm/yy) I wish to suspend the following operations (tick one): ☐ All operations; or ☐ Certain operations as described below (or attach additional pages) Your suspension will be effective from the date that South Wairarapa District Council processes your application. You will receive notification when this occurs. South Wairarapa District Council may require you to provide further information within a specified time. Question C: Do you want to change any of your registration details? Yes → Complete Sections 3-8 as applicable to your change(s). No → Go straight to Question D. Section 3. **Change Category** Change in operator details go to Section 4 Complete with new details Change of verification agency go to Section 5 Complete with new details

go to Section 6

go to Section 7

Change of scope of operations

Other change

| Change of multiple add   | dress details  | ☐ go to S   | ection 8   |  |  |  |
|--|--|-------------|--|--|--|--|
| Section 4. Change of Operator Details  Complete only the parts that have changed. Enter the details of the person who is either the owner or person in control of the food business. |  |             |  |  |  |  |
| Legal Name(s) of<br>Operator (e.g.<br>registered company,<br>partnership or<br>individual):  | ☐ I have attached a copy of the company name registration from the New Zealand Companies office (www.companies.govt.nz)  |             |  |  |  |  |
| NZ Business<br>Number  | If you have a New Zealand Business Number (NZBN), provide this. If you want more information about NZBN's, including how to get one, see <a href="https://www.business.govt.nz/companies/learn-about/nzbn">https://www.business.govt.nz/companies/learn-about/nzbn</a> |             |  |  |  |  |
| Trading Name, if any (i.e. 'Trading As'):  | ☐ Same as legal name above   |             |  |  |  |  |
| •  | or Address and Contact De  |             | ald from the   | public register by ticking the box below.          |  |  |
| Postal Address   | ngnouse, you may ask that the addi   |             |  | urier Address (if different to Postal Address)     |  |  |
| Address:   |  | Ad          | ddress:  |  |  |  |
|  |  |             |  |  |  |  |
| Town/City:   |  |             | Town/City:   |  |  |  |
| Postcode:  |  |             | Postcode:  |  |  |  |
| Country:   |  |             | Country:   |  |  |  |
| ☐ This address is a private dwellinghouse and I wish it to be withheld from the public register.   |  |             | ☐ This address is a private dwellinghouse and I wish it to be withheld from the public register. |  |  |  |
| Change of Contact  |  | ommunicatio | ne euch ae e   | sending approval documents and renewal reminders.  |  |  |
| Mobile telephone no.   | The cinered below will be used for ea  | Ot          | ther<br>lephone  | sortaing approval documents and renewal reminders. |  |  |
| Email  |  |             |  |  |  |  |
|  | By entering an email address you consent to being sent information and notifications electronically, if required.  |             |  |  |  |  |
|  | Name:  |             |  |  |  |  |
| Operator day-to-day<br>manager name and<br>position  | Position:  |             |  |  |  |  |
|  |  |             |  |  |  |  |
| Section 5. Ch  | Section 5. Change of Verification Agency   |             |  |  |  |  |

Name of New Verification Agency(ies) South Wairarapa District Council may contact your Verification Agency directly to clarify any

| issues related to your registration  | ☐ I have attached a copy of the letter confirming my nominated Verification Agency(ies) will provide verification services for my registration. |  |  |  |  |
|--|---|--|--|--|--|
| Section 6. Change of Scope of Operations  Tick one. Scope of Operations tells us about what you do. A Scope of Operations form is available online at  |   |  |  |  |  |
| http://mpi.govt.nz/foodsafety/food-act-2014/, Forms & templates  I have attached a completed Scope of Operations form providing a description of how my business scope of operations has changed (clearly marked additions and/or deletions) |   |  |  |  |  |
| Section 7. Other changes  If your change is not on the list, describe it here  | e. Attach additional pages if necessary.  |  |  |  |  |
|  |   |  |  |  |  |
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| Section 8. Multiple Address Details  |   |  |   |  |  |                  |                            |
|--|---|--|---|--|--|------------------|----------------------------|
| Add additional pages if necessary, or attach a file (e.g. spreadshe or changed sites.  | et) to your application email               | with all of the information req                | uired below. Indicate if the address is an addition,  | a removal or a chan  | ge to existing site.                       | Attach site pla  | ans for any new            |
| Legal name(s) of site operator (e.g. registered company, partnership or individual) (Tick box to confirm company registration certificate is attached for any Limited Liability Companies) | NZ Business<br>Number<br>(where applicable) | Site trading name, if any (i.e. 'Trading As'): | Street/Physical Address (location of actual place) (Tick box if you wish the address to be withheld from the public register because it is a private dwellinghouse) | Vehicle<br>Registration<br>numbers<br>(mobile<br>businesses<br>only) | Site day-to-<br>day<br>manager<br>position | Local<br>Council | Tick as applicable.        |
| E.g. ABC Foods Limited   |   | E.g. Yummy CakesRUs, Wellington Store          | E.g. 123 Cakes Road, Faketown   |  | E.g. Store<br>Manager                      |                  |                            |
|  |   | Same as legal                                  |   |  |  |                  | □Add<br>□Remove<br>□Change |
|  |   | Same as legal                                  |   |  |  |                  | □Add<br>□Remove<br>□Change |
|  |   | Same as legal                                  |   |  |  |                  | □Add<br>□Remove<br>□Change |
|  |   | Same as legal                                  |   |  |  |                  | □Add<br>□Remove<br>□Change |



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### Question D: Have you made any of the following changes?

- 1) an amendment to the physical address or location of the food business identified in the food control plan or national programme or, in the case of mobile premises, the nominated home base identified in the food control plan or national programme
- 2) any change to the scope of the food control plan or national programme or the procedures identified in the food control plan or national programme that may have an effect on the safety and suitability of food traded under that food control plan or national programme, including:
  - a. major alterations to facilities or equipment; or
  - b. changes to the nature of the business as a result of the merger of 2 or more food businesses or the reorganisation of one or more food business;

|         | suita   | an amendment to the food control plan or national programme that has an impact on the safety and suitability of the food, including (without limitation), the hazards and other factors that are reasonably likely to occur or arise; |   |                              |                                      |  |  |  |
|---------|---|---|---|------------------------------|--------------------------------------|--|--|--|
|         | 4) adding a new place of food business to a multi-site food control plan or national programme.   |   |   |                              |                                      |  |  |  |
|         | Yes → Your change is a significant amendment, and you must apply to register the amended food control plan. Go to Section 9.  |   |   |                              |                                      |  |  |  |
| L<br>Pi | <ul> <li>No → Your change requires notification only. Go straight to Section 11.</li> <li>I don't know → you can check with your verifier, or see Food Notice: Food Control Plans and National Programmes at <a href="http://mpi.govt.nz/food-safety/food-act-2014/">http://mpi.govt.nz/food-safety/food-act-2014/</a>, Requirements for more information.</li> </ul> |   |   |                              |                                      |  |  |  |
|         | Section 9   | ).  | Application for registration of significa   | intly amended food           | control plan                         |  |  |  |
|         | Template food control plan or National Programme  |   |   |                              |                                      |  |  |  |
|         | I confirm tha   | at:   |   |                              |                                      |  |  |  |
|         | 1. la   | am autho  | rised to make this application as the operator or a p   | erson with legal authority t | o act on behalf of the operator; and |  |  |  |
|         | 2. Th   | he inform   | nation supplied in this application is truthful and accu  | urate to the best of my know | wledge; and                          |  |  |  |
|         |   | 3. The operator is resident in New Zealand within the meaning of section YD 1 or YD 2 (excluding YD 2(2)) of the Income Tax Act 2007.   |   |                              |                                      |  |  |  |
|         | Name  |   |   | Job Title                    |                                      |  |  |  |
|         | Signature   |   |   | Date                         |                                      |  |  |  |
| Q       | Question E: Have you completed Section 8?  ☐ Yes → Complete Section 10. ☐ No → Go straight to Section 13.   |   |   |                              |                                      |  |  |  |
|         | Section 10. Multi-Site Food Control Plans - Applicant Statement  We accept PDF or scanned versions of signatures.   |   |   |                              |                                      |  |  |  |
|         | I confirm that:   |   |   |                              |                                      |  |  |  |
|         | 1. I am authorised to make this application on behalf of the operators listed in Section 9; and   |   |   |                              |                                      |  |  |  |
|         |   | very operator of the food businesses covered by the Food Control Plan is resident in New Zealand within the meaning of ection YD 1 or YD 2 (excluding section YD 2(2)) of the Income Tax Act 2007; and                                |   |                              |                                      |  |  |  |
|         |   |   | very operator of the food businesses covered by the Food Control Plan or National Programme is able to comply with the quirements of the Food Act 2014. |                              |                                      |  |  |  |
|         | Name  |   |   | Job Title                    |                                      |  |  |  |
|         | Signature   |   |   | Date                         |                                      |  |  |  |

| Section 11. Notification Statement  Complete for all notifications  |                               |                                      |  |  |  |  |  |
|---|-------------------------------|--------------------------------------|--|--|--|--|--|
| I confirm that:   |                               |                                      |  |  |  |  |  |
| 1. I am authorised to make this notification as the operator or a p   | person with legal authority t | o act on behalf of the operator; and |  |  |  |  |  |
| 2. The information supplied in this notification is truthful and accurate   | urate to the best of my know  | vledge; and                          |  |  |  |  |  |
| 3. The operator is resident in New Zealand within the meaning of section YD 1 or YD 2 (excluding section YD 2(2)) of the Income Tax Act 2007.   |                               |                                      |  |  |  |  |  |
| Name  | Job Title                     |                                      |  |  |  |  |  |
| Signature   | Date                          |                                      |  |  |  |  |  |
| Section 12. Final Check and Document Package to send to South Wairarapa District Council  |                               |                                      |  |  |  |  |  |
| Section 12. Final Check and Document Package to   | Seria to South Wall           | arapa District Courier               |  |  |  |  |  |
| Have you:   |                               |                                      |  |  |  |  |  |
| □ attached documentation to confirm significantly amended food control plan, if you are applying for registration of a significantly amended food control plan? □ attached a letter from your new verification agency, if applicable? □ attached copies of company registration certificates for any new or changed limited liability companies, if applicable? □ attached a new description of your scope of operations, if applicable? □ read and signed either the Applicant or Notification Statement, whichever applies? □ included fee payment (unless surrendering)? |                               |                                      |  |  |  |  |  |

#### **Collection of Information**

#### **Collection of Personal Information**

Pursuant to Principle 3 of the Privacy Act 1993, we advise that:

- This information is being collected for the purpose of submitting a change to a registered food control plan under the Food Act 2014; and
- The recipient of this information, which is the agency that will collect and hold the information, is South Wairarapa District Council, PO Box 6, Martinborough 5741; and
- Some of the information collected will be displayed on a public register; and
- The collection of information is authorised under section 45, 46, 51, 64, or 71, which ever applies, of the Food Act 2014. Failure to provide information under section 45, 46, or 51 is an offence under section 240 of the Act (penalty- fine up to \$200,000 for corporates and up to \$50,000 for individuals). Failure to provide information under sections 64 and 71 is an offence under section 244 (penalty- fine up to \$20,000 for corporates and up to \$5,000 for individuals)
- Under Principles 6 and 7 of the Privacy Act 1993, you have the right of access to, and correction of, any personal information that you have provided.

#### **Collection of Official Information**

All information provided to South Wairarapa District Council is official information and may be subject to a request made under the Official Information Act 1982.

If a request is made under that Act for information you have provided in this application, South Wairarapa District Council must consider any such request in accordance with its obligations under the Official Information Act 1982 and any other applicable legislation.