



FOOD SAFETY SUPERVISOR PROGRAM

FSS notification form

After appointing a Food Safety Supervisor (FSS), the proprietor (business owner) of a food business must notify the relevant enforcement agency of their FSS within 7 days.

The proprietor can meet this obligation by either filling in this notification form and submitting it to their local council, or by notifying online at the NSW Food Authority's website www.foodauthority.nsw.gov.au.

If businesses choose to use this paper based form, they must fill in the relevant sections below and submit to their council within 7 days.

Section 1 – Business details

Proprietor's name _____ Date _____

Proprietor's telephone _____

Proprietor's email (if any) _____

Business name _____

Trading as (if applicable) _____

Fill in the business address in Section 1a **OR** Section 1b, depending on which is most relevant

1a) Food premises address (for food premises except mobile catering)

Business address of food premises _____

Suburb _____ Postcode _____

OR

1b) Proprietor's business address (for mobile catering businesses only)

Proprietor's business address _____

Suburb _____ Postcode _____

Section 2 – Business authorisation



The proprietor of the food business should fill in the authorisation below

Proprietor authorisation

If any business information supplied by me may be considered to be untrue or misleading in any respect, I understand that the NSW Food Authority may take such action as it believes necessary, including the disclosure of the information to any person or body the Authority considers has a legitimate interest in receiving it, and I consent to such disclosure.

Proprietor's name _____

Signature _____

Date _____

Section 3 – Food Safety Supervisor's details

Tick appropriate box

New FSS

Existing FSS (change of details)

FSS' name _____

FSS' telephone (during FSS' working hours) _____

FSS' email (if any) _____

Food Safety Supervisor certificate details

RTO name _____

Certificate identification number _____

Date of issue _____

Section 4 – FSS authorisation



Fill in Section 4a **OR** Section 4b, whichever is applicable

4a) If an employee is the FSS:

FSS authorisation

I authorise my employer _____ (business name) to provide my personal information to the relevant enforcement agency for the purposes of s106E of the *Food Act 2003* (NSW). This authorisation is limited to the provision of my name, contact details and Food Safety Supervisor certificate details (including identification number and date issued).

If any information supplied by me may be considered to be untrue or misleading in any respect, I understand that the NSW Food Authority may take such action as it believes necessary, including the disclosure of the information to any person or body the Authority considers has a legitimate interest in receiving it, and I consent to such disclosure.

FSS' name _____

Signature _____

Date _____

OR

4b) If the proprietor of the business is the FSS:

FSS authorisation

I acknowledge and understand that I am providing my personal information to the relevant enforcement agency for the purposes of s106E of the *Food Act 2003* (NSW). This authorisation is limited to the provision of my name, contact details and Food Safety Supervisor certificate details (including identification number and date issued).

If any information supplied by me may be considered to be untrue or misleading in any respect, I understand that the NSW Food Authority may take such action as it believes necessary, including the disclosure of the information to any person or body the Authority considers has a legitimate interest in receiving it, and I consent to such disclosure.

FSS' name _____

Signature _____

Date _____