

Application for a dairy manufacturer licence

| Applicant Details (Mandatory fields or sections are marked with*) | | |
|--|--|--|
| *Is the legal entity that owns the dairy business a: | | |
| *Legal entity name: Provide full name | | |
| ACN Required if a Company | | |
| Does the business trade under a different name to the legal entity? | | |
| If yes, what is the registered trading name: (Note: this name will not appear on your dairy licence certificate) | | |
| ABN: Required if a trading name is provided | | |
| *Postal address: All correspondence regarding the licence will be posted to this address | | |
| Is there a parent company/organisation? ie: do you hold more than one DFSV licence, where the same company information could be applied? | | |
| If Yes, please supply the following parent company/organisation details: | | |
| Parent company postal address: | | |
| Parent company phone number: | | |
| Parent company email address: | | |



| Premises Details | | | | |
|---|-------------|----------|--|--|
| *Premises address: Please supply the full premises address | | | | |
| Number of staff on site: | | | | |
| Number of QA staff on site: | | | | |
| | | | | |
| Key Contacts | | | | |
| *Primary contact person (All correspondence regarding the licence will be addressed to this person). In the case of an individual, this is the designated licensee. | | | | |
| Title: | First Name: | Surname: | | |
| Job Title: | | | | |
| Position held in company (mandatory if the applicant is a company) | | | | |
| Work Phone: | Mobile: | Email: | | |
| | | | | |
| *Food safety contact person | | | | |
| Same as Primary Contact: | | | | |
| Title: | First Name: | Surname: | | |
| Job Title: | | | | |
| Work Phone: | Mobile: | Email: | | |
| | | | | |



| *Accounts payable contact person | | | | |
|----------------------------------|-------------|----------|--|--|
| Same as Primary Contact: | | | | |
| Title: | First Name: | Surname: | | |
| Job Title: | | | | |
| Work Phone: | Mobile: | Email: | | |

Production Information

*Is your food Safety Program complete and is it being submitted as part of this application:

If no, please advise why:

Please note that it is an offence under the Dairy Act 2000 to commence operations prior to the licence being issued by Dairy Food Safety Victoria.

A Food Safety Program is required to be submitted with a licence application for all dairy manufacturer licences. Contact DFSV or see our website for further details.

*What type of milk will be used at the premises:

Please select all that apply. Hold down Ctrl button to select more than one option.

*Will you receive raw milk at the premises:

If yes, from where will you receive the raw milk:

Please select all that apply. Hold down Ctrl button to select more than one option.



| *Is your business registered with local government as a food premises under the Food Act 1984: | |
|--|--|
| If yes, please advise which local government area: | |
| *Do you intend to export dairy food: | |
| *Are you registered with the Department of Agriculture, Fisheries and Forestry (DAFF) | |
| If yes, please provide your export registration number: | |
| | |
| *Type of dairy products manufactured Please place a tick in the box for the products you intend to maproduction amount. | anufacture and the intended estimated annual |
| <u>Product</u> | Yes ✓ + Estimated Annual Production |
| Butter & Spreads | |
| Cheese - Fresh | |
| Cheese - Hard | |
| Cheese - Semi-Soft | |
| Cheese - Shredded, grated and cut | |
| Cheese - Smear ripened | |
| Cheese - Surface Mould Ripened | |
| Concentrates | |
| Dairy desserts | |
| Dairy powders | |
| Dips - Cream cheese based | |

| Dips - Yoghurt based | |
|---|--|
| Fermented milk products | |
| Ghee | |
| Ice cream | |
| Pasteurised liquid cream products | |
| Pasteurised liquid milk products | |
| Pilot plant/Research & Development Circle tonnes or litres, whichever is applicable | |
| UHT milk | |
| Unpasteurised milk product | |
| Other: Please advise | |
| | |
| *Will you supply any dairy products to another Dairy Food Safety Victoria licensed dairy manufacturer for further manufacturing or packaging: | |
| If yes, please list the product type and estimated quantity that will be supplied: | |
| *Will non-dairy products also be manufactured at the premises: | |
| If yes, please list the product type/s | |
| *What percentage of your total food production will be dairy: | |



| Applicant History | | | |
|---------------------------------------|--------------------------------|---|---|
| | | the company; for a partnership – a partner; for an on to a requirement of any of the following Acts: | |
| Dairy Act 2000 | | | |
| Food Act 1984 | | | |
| Public Health and V | Vellbeing Act 2008 | | |
| If yes, please provide details: | : | | |
| | | | |
| Licence Condition | S | | |
| Licence conditions can be viewed | on the Dairy Food Safety Victo | ria website at www.dairysafe.vic.gov.au | |
| | | | |
| Declaration | | | |
| By signing and submitting this app | lication, I declare: | | |
| in this application is true and corre | ct. I have read and understood | on behalf of the applicant and all information provide the Dairy Food Safety Victoria Privacy Policy and th oth located on the Dairy Food Safety Victoria website | е |
| | | e under Section 53 of the Dairy Act 2000 to provide with respect to a dairy industry licence issued under | - |
| | | I will be required to collect and pay their licence fee iry Food Safety Victoria monthly based on the litres o | |
| Title: | First Name: | Surname: | _ |
| Job Title: | | | |
| Email Address: | | | |



Signature:

Select date from calendar

Date:

Privacy Statement

Protecting your privacy is important to Dairy Food Safety Victoria. In completing this form we will be collecting information from you, for the primary purpose of administrating the Dairy Act 2000. We will be using the information to initially assess your application for a dairy industry licence. We may use your information to help us understand our market to improve our services. However, we only use aggregate information, so individuals are never identifiable.

Dairy Food Safety Victoria may also use the information collected to provide you with customer information about its offerings in support of your business needs. We otherwise handle, use, or disclose your information in accordance with our privacy policy, which is available on the website homepage. You may access the personal information we collect about you by contacting Dairy Food Safety Victoria's Privacy Officer on 9810 5900 or in writing to Dairy Food Safety Victoria, PO Box 8221, Camberwell North, Victoria 3124.

Payment

Application fee payable: \$200.15.

Note: this fee must be paid before your application can be processed.

Paid

Date

Payment method:

EFT - Commonwealth Bank, BSB: 063-010 Account: 1068 1937
 Please ensure the licence applicant name is included in the reference field.

Please see the declaration section for information regarding the payment of your licence fee if your application is approved.

Submitting the Application

Please check that all mandatory fields or sections have been completed and preferably submit the application by email to applications@dairysafe.vic.gov.au

The application can also be posted to:

Dairy Food Safety Victoria

PO Box 8221

Camberwell North, Vic 3124

Once the application form is submitted together with the application fee and a Food Safety Program, a DFSV Food Safety Manager will contact you to discuss your food safety program and make an appointment to inspect the premises.

