Food Business Registration Form (Berries)

Shire of Donnybrook Balingup Food Act 2008



Primary Producers & Processors of Berries

Part A: Food	Business Details	Section :	Section 107(1) / 110(2)				
Proprietor Name (Individual / Body Corporate / Trustee *):							
* If food business is opera	ating under a trust, please write the	name of the person who is the trustee.					
Address of Farm /							
Processing Facility:	Locality:	Postcode:	Postcode:				
Postal Address:							
ABN:							
Phone:		Mobile:					
Email:							
Primary Language Sp	oken:						
What berries do you	grow or process?						
☐ Strawberry	☐ Blackberry	☐ Silvanberry					
☐ Blueberry	☐ Boysenberry	☐ Youngberry					
☐ Raspberry	☐ Loganberry						
☐ Other (please spe	cify):						
Which of these activi	ities do your business underta	ke in relation to berries?					
☐ Growing & Harves	sting 🗆 Sorting	☐ Packing	☐ Packing				
☐ Transporting	☐ Processing						
\square Other (please spe	cify):						
To whom / where do you sell your produce locally?							
☐ Farmer's Markets	☐ Perth Market	Agent 🗆 Independent	☐ Independent Grocers				
☐ Large Retailers	☐ Café / Restau	rant / Caterers Delivery to Cu	☐ Delivery to Customer				
☐ Farm Gate	☐ Packer	☐ Processor					
\square Other (please spe	cify):						

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Do you export your produce overseas?			☐ Yes	□ No				
How do you grow your berries (select all that apply)?								
\square In the ground	☐ In containe	☐ In containers (post or bags)		\square On tabletops (strawberries)				
\square Other (please specify):								
Are there any covers over your berries?								
\square No covering / in the open	n 🔲 Under polyt	☐ Under polytunnels		☐ In a greenhouse				
☐ Under netting	☐ Under low o	☐ Under low cloches (strawberries)						
□ Other (please specify):								
Is there covering over the soil under your plants/containers?								
☐ Bare Soil	☐ Plastic or fa	☐ Plastic or fabric mulch over mounds/ground						
☐ Other (please specify):								
What water source(s) do yo	u use to irrigate you	berries?						
□ Bore	☐ River	□ Dam	□R	ainwater				
☐ Town/Scheme Supply	☐ Carted Water	☐ Recirculate	ed Water					
☐ Other (please specify):								
-								
What fertilisers do you use	to grow your berries	?						
What fertilisers do you use ☐ Manure	to grow your berries □ Liquid Ferti		☐ Biosolids ,	/ Compost				
·	☐ Liquid Ferti	iser	□ Biosolids ,	/ Compost				
☐ Manure	☐ Liquid Ferti	iser	☐ Biosolids ,	/ Compost				
☐ Manure	☐ Liquid Ferti☐ Other (plea	liser se specify):						
☐ Manure ☐ Pellet/Granular Fertiliser What records do you keep t	☐ Liquid Ferti☐ Other (plea ☐ Other (plea to ensure all berries s (tick all that apply)?	liser se specify):	m / pack house					
☐ Manure ☐ Pellet/Granular Fertiliser What records do you keep t back to where it was grown	☐ Liquid Ferti ☐ Other (plea to ensure all berries s (tick all that apply)? he punnet label.	liser se specify): old from your far	m / pack houseceipts.					
☐ Manure ☐ Pellet/Granular Fertiliser What records do you keep t back to where it was grown ☐ The farm details are on t	☐ Liquid Ferti ☐ Other (plea to ensure all berries s (tick all that apply)? he punnet label.	liser se specify): old from your far Purchase re Logbook / Jo	rm / pack house ceipts. ournal.	e can be traced				

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Do you on-sell, p	ack, or repack	berries from another producer?	☐ Yes	□ No	
If Yes, please spe	cify how tracel	pack to growing sites is achieved:			
☐ Source farm a	address on the	punnet label.			
☐ Source farm i	dentification co	ode on the punnet label.			
☐ Separate bard	code for each s	ource farm on the punnet label.			
☐ Other (please	specify):				
Declaration & Pa	ayment of Pre	scribed Fee			
When lodging this form, please ensure that all required information and attachments have been provided. Failing to do so may result in delays to your application.					
Please be aware that by submitting this application, you will be required to pay a Prescribed Fee of \$50.00 . You will be contacted by the Shire for payment.					
I, the person making this application, declare that the information contained in this application is true and correct in every particular.					
Name of person completing form / authorised contact*:					
* In the case of a co.	mpany, the signin	g officer must state their position in the co	трапу.		
Position of perso	on completing f	orm / authorised contact:			
Signature:			Date:		
8					
Applicant Phone	:				
You can submit your completed form or contact the Shire via any of the following:					
回級委回	Online:	Scan the QR code, or visit www.d	lonnybrook-balii	ngup.wa.gov.au	
	Email:	shire@donnybrook.wa.gov.au			
	In Person:	1 Bentley St, Donnybrook, WA 62	39 (Shire Admini	stration Office)	
图像增加7	Phone:	(08) 9780 4200			
The Shire Administration Office is open from 8:30am to 4:00pm, Monday to Friday (closed on Public					

Holidays and where otherwise stated – notices of office closures are available online)

The information gathered in this form will be used for purposes related to the administration of the Food Act 2008 (WA). In accordance with regulation 51 of the Food Regulations 2009 (WA), certain details (proprietor name, trading name and address details) may be made publicly available.