**Please note this application for food stall approval is separate to the approvals issued by the Market Organiser. Please contact the relevant Market Organiser prior to submitting this application.**

**Please note that applications submitted within 7 working days from the event date may incur an Expedited Service Fee.**

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| **Part 1: Applicant Details** |
| Title:  | Given Name/s: | Surname: |
| Business/Organisation Name: |
| Address: |
| Email Address: |
| Contact telephone number:(M) (W) |
| **Part 2: Please select which Market/s you wish to attend** |
| [ ]  **Kalamunda Farmers Market** Central Mall, KalamundaRun by:Kalamunda Chamber of Commerce | [ ]  **Kalamunda Night Market**Central Mall, KalamundaRun by:Kalamunda Chamber of Commerce | [ ]  **Kalamunda Artisan Market** Central Mall, KalamundaRun by:Kalamunda Rotary Club  | [ ]  **Forrestfield Night Market** 20 Strelitzia Road ForrestfieldRun by:Kalamunda Chamber of Commerce |
|  **Part 3: Food – Please provide a list of all food types to be sold:** |
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| **Part 4: Stall Structure and Registration - Please tick and complete all that apply** |
| ☐ Trestle Table ☐ Marquee ☐ Registered food vehicle: Registration #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ Other (please describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ This stall or van is registered with the City of Kalamunda, Registration Number [FP] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , OR☐ This stall or van is registered with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of local authority),☐ This stall or van is not registered. Registration may be required prior to approval of temporary food stalls. |

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| **Part 5: Address where food is prepared if off site:** |
| Address: |
| ☐ Local Government Certificate of Registration attached, OR |
| ☐ This address is not registered as a food business. *Registration may be required prior to approval*  |

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|  **Part 6: Transportation Details** |
| How will food be transported to site? | ☐ Car ☐ Van ☐ Refrigerated Van☐ Other *(please describe):…………………………………………………………* |
| What temperature control methods will be used? |  |
| Approximate Travel Time: |  |
| **Part 7: Applicant Checklist** |
| We are a Charity/Not for Profit Organisation ☐ Yes ☐ No (If yes, please attach evidence of charitable status)Charity/Not for Profit organisations are exempt from the temporary food stall application fee. However, if the application is received within 7 working days from the event date, an expedited service fee of $52.50 is payable. |
|  1. Food Business Registration Certificate attached ☐
2. Public Liability Insurance Certificate attached ☐
 |
| **Part 8: Declaration** |
| I declare the information provided on this form is accurate, complete and correct. Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Part 9: Payment** |
| **Fees:**Application Fee ☐ **$ 86** Additional Expedited Service Fee ☐ **$ 52.50** *(For applications required within 7 working days of the operating date)* |
|  ***Payment must be received before your application will be processed.*** Total Payable **$**\_\_\_\_\_\_\_\_\_**Payment Options:**In Person: Pay via cash, EFTPOS or credit card at the City of Kalamunda, between 8.30am - 4.30pm Mon to Fri.Credit Card: Credit card payments can be taken over the phone 9257 9999 ***Note: Credit card and Pay Pass transactions incur a surcharge of 0.46%*****Lodging your application form:**In Person: City of Kalamunda – 2 Railway Rd, Kalamunda WAVia Email: enquiries@kalamunda.wa.gov.au Via Post: PO Box 42, Kalamunda WA 6926 |
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