



Restaurant
& Catering

GOLD LICENCE CATERER



Accreditation Application/Renewal Form

Caterers

RETURN COMPLETED FORMS:

Restaurant & Catering

PO Box 121

SURRY HILLS NSW 2010

T: 1300 722 878

F: 1300 722 396

W: www.rca.asn.au

Gold Licence Applications are submitted to the Caterers Accreditation Council of Restaurant & Catering Australia. Please note that the accreditation process **may take up to four (4) weeks**. Please ensure all supporting documentation is included with your application (see below for the checklist). The application will be reviewed by the Caterers Accreditation Council only when ALL supporting documentation is supplied.

SECTION 1: BUSINESS

New Application: Yes No Renewal Application: Member Number # _____ Gold Licence # _____

Business Name: _____

Contact Person: _____

Kitchen Address: _____

Suburb: _____ State: _____ Postcode: _____

Postal Address: As Above As Follows: _____

Suburb: _____ State: _____ Postcode: _____

Business Phone: _____ Mobile: _____

Email Address: _____

SECTION 2: SUPPORTING DOCUMENTS

ITEM	ATTACHED
• Satisfactory health inspection report on all commercial kitchens & transportation (within 12 months of the last inspection) - cannot use HACCP certification	<input type="checkbox"/>
• Certificate of Currency of workers compensation in the name of the applicant (if the amount is less than \$100,000 a statement will need to be supplied substantiating why the amount is below this figure)	<input type="checkbox"/>
• Certificate of Currency of Public and Property Liability insurance in the name of the applicant (min. \$10mil for each liability)	<input type="checkbox"/>
• Food Safety Program outlining the measures that are put in place to ensure food safety (turn overleaf for recommended templates)	<input type="checkbox"/>
• Food Safety Supervisor Certificate (mandatory only in QLD / VIC / NSW / ACT)	<input type="checkbox"/>
• Background resume of applicant showing at least five (5) years experience in hospitality and/or catering industry, and supported with documentation including copies of training qualifications and copies of qualifications at trade level. - new applications only	<input type="checkbox"/>
• A statement explaining how you keep food safe when transporting to venues—if you do not use a transport vehicle, advise the procedures you would go through to ensure food is kept safe. (turn overleaf for recommended templates.)	<input type="checkbox"/>
• Gold Licence Application Fee (\$160 for members, \$570 for non-members)	<input type="checkbox"/>

SECTION 3: CATERING DETAILS

Type of Business: Sole Trader Partnership Company Other: _____

Do you have a caterers liquor Licence? Yes No Licence Number: _____

Are you incorporated? Yes No ABN/ACN: _____

SECTION 4: COMPULSORY DECLARATION (TICK TWO ONLY)

I / We have read and agree to the terms & conditions (available at www.restaurantcater.asn.au). I have read through all the information and understand my obligations in obtaining this licence. I also understand that my application will not be processed until all relevant documentation is submitted.

I / We declare in the name of the applicant, this business has not been and/or received an infringement against the business in the last 12 months. By signing this we acknowledge any evidence showing the business has received an infringement that is not notified to the Caterers' Accreditation board, means the accreditation can be removed.

I / We declare in the name of the applicant, this business has received an infringement within the last 12 months. We have provided details of the infringement and evidence that the infringement has been rectified.

Full Name: _____ Date: _____

Signature: _____

(the applicant must tick two (2) of the above boxes and sign and date this document before the application can be processed. Failure to do so, may cause your application to be rejected.)

SECTION 5: PAYMENT DETAILS

Gold Licence Application Fee (member)	\$160.00	<input type="checkbox"/>
Gold Licence Application Fee (non—member)	\$570.00	<input type="checkbox"/>
Additional Kitchen Sites (if the business has more than one kitchen, please include section 2 documents for each site.)	\$160.00 x _____ = \$ _____	<input type="checkbox"/>

List Sites: _____

If there is not enough room to list all the additional kitchens, please attached a separate sheet.)

Additional Certificates (if the business trades under multiple names, additional certificates can be printed at a fee)	\$35.00 x _____ = \$ _____	<input type="checkbox"/>
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List Names: _____

If there is not enough room to list all the additional names, please attached a separate sheet.)

TOTAL FEE PAYABLE: \$ _____

I would like to pay by: Cheque (payable to Restaurant & Catering) VISA MASTERCARD AMERICAN EXPRESS DINERS CLUB

Cardholders Name: _____

Card Number: _____ / _____ / _____ / _____ Expiry Date: _____ / _____ CVN _____

Cardholders Signature: _____ Date: _____ / _____