

Food Premises Fit Out/Alterations Inspection Request/Tax Invoice

I _____ of _____
(Full name in BLOCK LETTERS) (address in BLOCK LETTERS)

request that the City of Belmont undertakes an inspection of the premises known as:

_____ situated at:
(Name of premises in BLOCK LETTERS)

_____ on
(Address of premises in BLOCK LETTERS)

(Proposed Inspection Date and Time in BLOCK LETTERS)
(Final Date and Time is subject to confirmation by the City)

to ensure compliance with relevant food legislation.

I confirm that at the time of inspection, all works will be fully completed and that the premises will be clean and comply with the *Australia New Zealand Food Standards Code*.

Fees:

Fee for this service is \$130.00.

I understand that if the premises are deemed non-compliant:

- *submission of a new inspection request form and payment of the inspection fee will be required; and*
- *a Certificate of Registration will not be issued until the premises are deemed compliant.*

Signature Date

Contact Phone Number: _____

Email address: _____

CITY OF BELMONT

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