

## Application Form FA10MST New Multi-Site Template Food Control Plan under Food Act 2014

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### Before you start, let's check that you have everything you need:

- You are filling in this form to register with Ministry for Primary Industries because your business is a multi-site business operating across multiple council regions. **If you operate one or more sites within one council region, you must register with that council using their application form.**
- Make sure you have registration information for every address where food is traded. Multi-site means there is more than one address where food is traded, and you would like to register all sites under one application. A spreadsheet of the sites' information attached to your application is acceptable.
- A copy of the site plan for each address.
- The completed scope of operations document that fits your business. Find more information and a form to fill in by visiting <https://www.mpi.govt.nz/food-business/running-a-food-business/forms-documents-food-plans-programmes/>
- A copy of the confirmation letter from your verifier. A list of recognised verification agencies can be found here: <https://www.mpi.govt.nz/food-business> , Registers & lists.
- If your business is a registered limited liability company, your New Zealand Business Number (NZBN). See [www.companies.govt.nz](http://www.companies.govt.nz)
- You need to make sure you can confirm that every operator of the food businesses covered by the food control plan is resident in New Zealand within the meaning of section YD 1 or YD 2 (excluding section YD 2(2)) of the Income Tax Act 2007, and that you include NZBN numbers for any limited liability companies.
- If you were previously registered with either MPI or your local council, make sure you have your previous registration IDs on hand. These could be IDs such as *FSA-JBIP-12345* or *WEBB-12345*.
- Your application fee of \$194.06 (incl. GST).

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### Read these notes before you start filling out the form

- This form must be used when applying to MPI for registration of an FCP under section 53 of the Food Act 2014. Some information provided will be included on the public register; however, you can ask for certain personal information to be withheld from the published register. We will tell you where you can choose that option. You can view the public register here: <https://www.mpi.govt.nz/food-business> ,Registers & lists.
- If you would like to use a template or model FCP developed by a third party (approved under section 40), do not use this form; use the FA40 form instead.
- Send the completed application form together with the fee and other requirements above to MPI at the above address. We prefer email files. Processing time is up to 20 working days from the time we determine that your application is complete.



- Throughout this form you will need to tick boxes that look like this ☐. A checked box indicates a 'yes' answer.
- If there are any changes to the details provided in this application after it has been sent to MPI, you must promptly inform us of the changes in writing.

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**Question A: Have you previously been registered as a food business with MPI or your local council?**

- ☐ Yes → Complete section 1 then go to section 2.  
☐ No → Go to section 2

### Section 1. Previous registration IDs

*If you have previously been registered as a food business with MPI or your local council enter your registration ID number(s).  
e.g. FSA-JBIP-12345 or WEBB-12345*



**Question B: Are you applying to register the MPI template food control plan: Simply, Safe and Suitable?**

- ☐ Yes → Go straight to section 3.  
☐ No → Go to section 2

### Section 2. MPI template name or number

*Provide the template name or ID number for the food control plan you are using. If you are using a section 40 template, use the FA40 form.*

### Section 3. Food Control Plan Operator Details

*Enter the details of the person who is either the owner or person in control of the food business.*

**Legal Name(s) of Operator**  
(e.g. registered company,  
partnership or individual)

**NZ Business Number (NZBN)**

*For more information about NZBN's, including how to get one, see [www.nzbn.govt.nz](http://www.nzbn.govt.nz)*

**Trading Name, if any** (i.e.  
'Trading As')

☐ Same as legal name above

<b>Operator Address and Contact Details</b>			
<i>You must provide this information to be registered. However, if the address is a dwelling/house, you may ask that the address is withheld from the public register by ticking the box below.</i>			
Postal Address		Physical / Courier Address (if different to Postal Address)	
Address:  Town/City:  Postcode:  Country:  <input type="checkbox"/> This address is a private dwelling/house and I wish it to be withheld from the public register.		Address:  Town/City:  Postcode:  Country:  <input type="checkbox"/> This address is a private dwelling/house and I wish it to be withheld from the public register.	
<b>Local Authority(Council)</b> <i>This is the council for the operator physical address</i>			
<b>Contact Person Details</b>			
<i>The contact person details entered below will be used for communications, such as sending approval documents and renewal reminders. Contact MPI if the details change.</i>			
<b>Email</b>		By entering an email address you consent to being sent information and notifications electronically, if required.	
<b>Mobile telephone no.</b>		<b>Other telephone no.</b>	
<b>Operator day-to-day manager name and position</b>		Name:  Position:	

<b>Section 4. Verification Agency Details</b>	
<b>Name of Verification Agency(ies):</b>  <i>MPI may contact your Verification Agency directly to clarify any issues related to your registration</i>	<input type="checkbox"/> I have attached a copy of the letter confirming my nominated Verification Agency(ies) will provide verification services for my registration.  <i>Note: letter should list every site the agency(ies) will provide verification services for. If too many to list, letter should state 'all sites'.</i>

<b>Section 5. Scope of Operations</b>
<i>Scope of Operations tells us more about what you do. The form is available online at <a href="http://www.mpi.govt.nz/food-business/running-a-foodbusiness/">www.mpi.govt.nz/food-business/running-a-foodbusiness/</a>. Forms &amp; documents, scope of operations. Please tick one option below.</i>
<input type="checkbox"/> I have attached a completed Scope of Operations form providing a description of my business operations; or, <input type="checkbox"/> I have attached a written description of my business operations. This includes all of the following: <ul style="list-style-type: none"> <li>- the Food Act sectors I will operate in – for example, retail, food service, manufacturing</li> <li>- my products – the type of food I will make or sell</li> <li>- processes – how I will make my food</li> <li>- trading operations – how and where I will sell my products</li> </ul>

# New Zealand Food Safety

Haumaru Kai Aotearoa

## Section 6. Site Address Details

Include all addresses where food is handled, **and a site plan for each address**. If you already included a food handling site address in section 3, repeat it here. Add additional rows as necessary or attach a file (e.g. spreadsheet) to application email with all of the information required below.

Legal name(s) of site operator (e.g. registered company, partnership or individual)	NZ Business Number (where applicable)	Site trading name, if any (i.e. 'Trading As')	Street/Physical Address (location of actual place) (Tick box if you wish the address to be withheld from the public register because it is a private dwelling/house)	Vehicle Registration numbers (mobile businesses only)	Site day-to-day manager position/job title	Local Council
E.g. ABC Foods Limited		E.g. Yummy CakesRUs	E.g. 123 Cakes Road, Faketown 1234 <input checked="" type="checkbox"/>		E.g. Store Manager	
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			

## Section 7. Applicant Statement

*Complete for all applications. We accept PDF or scanned versions of signatures.*

I confirm that:

1. I am authorised to make this application as the operator or a person with legal authority to act on behalf of the operators listed in section 6; and
2. The information supplied in this application is truthful and accurate to the best of my knowledge and belief; and
3. Every operator of the food businesses covered by the Food Control Plan is resident in New Zealand within the meaning of section YD 1 or YD 2 (excluding section YD 2(2)) of the Income Tax Act 2007; and
4. Every operator of the food businesses covered by the Food Control Plan is able to comply with the requirements of the Food Act 2014.

<b>Name</b>		<b>Job Title</b>	
<b>Signature</b>		<b>Date</b>	

## Section 8. MPI Service Charge

**ON PAYMENT THIS BECOMES A TAX INVOICE** GST No: 64-558-838

Template/Model Food Control Plan Registration	1.25 Hours	\$194.06
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Note: In addition to the application fee above, an assessment time fee based on an hourly rate of \$155.25 (incl. GST) per hour or \$38.81 (incl. GST) per 15 minutes may be charged in instances where applications take longer to process.

Payments comprising multiple fees must be supported by a remittance advice. Please attach your payment confirmation to this application or send it separately to: [approvals@mpi.govt.nz](mailto:approvals@mpi.govt.nz)

**PAYMENT OPTIONS:** Payment must be made using **credit/debit card or direct credit** (MPI does not accept cash). Please tick and fill in the appropriate section.

☐ **CREDIT/DEBIT CARD (preferred option):**

1. To pay by credit card (Visa or MasterCard) go to <https://www.mpi.govt.nz/food-safety/payments> and follow the instructions.
- ☐ I have attached my credit card payment receipt

☐ **DIRECT CREDIT:**

1. Pay into Bank Account no. **03 0049 0001709 002**
2. In the 'Reference' details, put the code: **'Food Act {your Company name}'**
3. Enter the date of deposit and your name (payer) below.

<b>Date of Deposit</b>		<b>Your Name (Payer)</b>	
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## Section 9. Final Check and Document Package to send to MPI

Have you:

- ☐ filled this form in completely and legibly?
- ☐ attached copies of site plans?
- ☐ attached a letter from your verification agency?
- ☐ attached a description of your scope of operations?
- ☐ read and signed the Applicant Statement?
- ☐ Paid and provided payment details

## Collection of Information

### Collection of Personal Information

Pursuant to Principle 3 of the Privacy Act 1993, we advise that:

- This information is being collected for the purpose of registering under the Food Act 2014; and
- The recipient of this information, which is the agency that will collect and hold the information, is MPI, PO Box 2526, Wellington 6140; and
- Some of the information collected will be displayed on a public register; and
- The collection of information is authorised under section 53 of the Food Act 2014. The provision of this information is necessary in order to process an application for registration under section 53; and
- The supply of this information is voluntary; however, failure to provide the requested information is likely to result in a return of this application, and may ultimately result in a refusal to register, in accordance with section 54 and 57 of the Food Act 2014; and
- Under Principles 6 and 7 of the Privacy Act 2020, you have the right of access to, and correction of, any personal information that you have provided.

### Collection of Official Information

All information provided to MPI is official information and may be subject to a request made under the Official Information Act 1982.

If a request is made under that Act for information you have provided in this application, MPI must consider any such request in accordance with its obligations under the Official Information Act 1982 and any other applicable legislation.