

Application to surrender registration

Food Act 2014



South Waikato District Council
Torphin Crescent
Private Bag 7
TOKOROA 3444

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Email: Environmental.Health@southwaikato.govt.nz
Website: www.southwaikato.govt.nz

Please use this form if wish to advise Council that your business has been sold or has ceased trading, and you want to surrender your registration.

Who is the operator of the food business?

Legal Name(s) of Operator:

Certificate Number:

Trading Name:

Address of business:

Contact Person Details

(Provide contact details of the person informing us of these changes)

Name:

Position:

Phone:

Email:

I wish to surrender the registration from the following date:

Applicant Statement

I confirm that:

- I am authorised to make this application as the operator or a person with legal authority to act on behalf of the operator; and
- The information supplied in this application is truthful and accurate to the best of my knowledge and belief; and
- The operator 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
- The operator of the food business is able to comply with the requirements of the Food Act 2014 and any relevant legislation applicable to the business.

Name:

Position:

Signature:

Date: