

# Temporary Food Premises - Food Stall Design Form

*(events, markets and non-profit organisations)*

Food Act 2006

This form is to be submitted together with an application for a temporary food premises  
Please complete ALL sections of the form

## 1. FOOD TYPES

List the food types to be sold:

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## 2. STALL TYPE

**Ceiling:**

Describe your roof/ceiling.  
What material is it?  
How is it secured?

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**Walls:**

Describe your walls.  
How many sides?  
What material?  
How are they secured?

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**Flooring:**

Describe the flooring.  
What area does it cover?  
What material is it?  
How is it secured?

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## 3. STALL LAYOUT

**Describe the layout of the stall:**

Include all equipment, e.g. tables, BBQ, cooler box, bain-marie, hand wash facility etc.

Alternatively, you may draw a floor plan here or attach separately.

(does not need to be to scale)

## 4. FOOD STORAGE & DISPLAY

**Food storage during transportation:**

Describe how your food is stored during transportation, e.g. refrigerated vehicle, cooler box (esky), enclosed containers.

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**Food storage within stall:**

Describe your food storage facilities within the stall, e.g. cooler box (esky), hot box, enclosed containers

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**Food display:**

If relevant, describe your food display facilities, e.g. bain-marie, pie warmer, cold display.

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## 5. HAND WASHING FACILITY

**Hand washing:**

Describe your hand washing facilities.

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## 6. CHECKLIST

Probe thermometer	<input type="checkbox"/>	Liquid soap	<input type="checkbox"/>
Spare utensils	<input type="checkbox"/>	Paper towel	<input type="checkbox"/>
Utensil washing facility	<input type="checkbox"/>	Potable water supply	<input type="checkbox"/>
Detergent	<input type="checkbox"/>	Rubbish bins	<input type="checkbox"/>
Tea towels	<input type="checkbox"/>	Waste water disposal	<input type="checkbox"/>
Sanitiser	<input type="checkbox"/>	Oil/fat disposal	<input type="checkbox"/>
Cloths/wipes/sponges	<input type="checkbox"/>	1 <sup>st</sup> aid kit (with coloured band-aids)	<input type="checkbox"/>
Broom/dustpan/mop	<input type="checkbox"/>	Fire safety equipment	<input type="checkbox"/>
Buckets/containers	<input type="checkbox"/>	Electrical leads tagged and tested	<input type="checkbox"/>

**Example floor plan:**

