



Food (Registration of Premises)(Jersey) Order 2001  
Schedule 1 (Article 4(1))  
Form of Application for Registration of Food Premises



1. **Full Address of Premises** \_\_\_\_\_  
 \_\_\_\_\_ **Post Code** \_\_\_\_\_  
 (or address at which movable establishment ordinarily kept)

2. **Trading name of food business** \_\_\_\_\_  
**Telephone Number** \_\_\_\_\_ **email** \_\_\_\_\_ **Website** \_\_\_\_\_

3. **Full name of food business operator** \_\_\_\_\_  
 (Or Limited Company)

4. **Head Office address of food business operator** \_\_\_\_\_  
 \_\_\_\_\_ **Post Code** \_\_\_\_\_  
**Telephone Number** \_\_\_\_\_ **email** \_\_\_\_\_  
 (where different from address of establishment)

5. **Type of food activity** (Please tick **all** the boxes that apply)

Staff Restaurant/Canteen	Hospital/Residential Home/School
Retailer (including farm shop)	Distribution/Warehousing
Restaurant/Café/Snack Bar	Food Manufacturing/Processing
Market/Market Stall	Importer / Exporter
Takeaway	Event / Outdoor Catering
Hotel/Guest House	Public House
Private House used for a Food Business	Mobile / Moveable Establishment
Wholesale/Cash and Carry	Farmer - livestock
Food Broker / Food Supplements	Farmer - arable
Other (Please specify):	

6. **Number of toilets (if applicable):**

	Water Closet	Wash Hand Basin	Urinal
<b>Staff only</b>			
<b>Male</b>			
<b>Female</b>			
<b>Disabled access</b>			
<b>Unisex</b>			

7. **Is this a new business?** YES    NO  
 If so what date do you intend to open?  
 (NB. 28 days notice required)  
 \_\_\_\_\_

8. **Is this a seasonal business?** YES    NO  
 If so what are your dates of operation?  
 \_\_\_\_\_ to \_\_\_\_\_

9. **Does this business have an Alcohol Licence?** YES?    NO?    If so which category(ies)?

10. **Water supplied to the food business** (Please tick):  
 Public (Mains) supply                  Private supply (e.g. borehole, well)                  Other

11. **How many staff at each level of Food Safety Training do you have?**  
 Basic (Level 1)                  Foundation (Level 2)                  Intermediate (Level 3)                  Advanced (Level 4)

**Signature** (if completing by hand) \_\_\_\_\_ **Date** \_\_\_\_\_

**Name (In block capitals)** \_\_\_\_\_ **Job Title** \_\_\_\_\_

If completing electronically tick this box in acknowledgement the details provided above are accurate

The completed form must be returned to: Environmental Health, Maison le Pape, St Helier, Jersey, JE2 3PU or emailed to [environmentalhealth@gov.je](mailto:environmentalhealth@gov.je)

## SCHEDULE 2

### (Article 6)

#### PREMISES EXEMPT FROM REQUIREMENT TO REGISTER

- Premises at which only the commercial operation carried out in relation to food or food sources are one or more of the following:
  - The collection of honey from bees;
  - The sale by retail of food by means of an automatic vending machine on those premises;
  - The sale of supply of beverages, or of biscuits, potato crisps, confectionery or similar products, ancillary to a business whose principal activity is not the sale of food; or
  - The supply of food in the course of a religious ceremony.
- Premises controlled by a voluntary organisation or the trustees of a charity and used only for the purposes of such organisation or charity, where no food (other than ingredients for the preparation of beverages, sugars, biscuits, potato crisps or similar products) is stored for sale.
- Domestic premises –
  - where the person is a volunteer preparing food for a voluntary organisation;
  - where the sale of food is ancillary to the provision of accommodation for not more than 5 persons;
  - where the supply of food is ancillary to caring for a privately fostered child within the meaning of Part 8 of the Children (Jersey) Law 2002; or
  - where such premises are used for the sale or preparation of honey (wherever collected) or of horticultural or viticultural produce harvested on the premises.