

Croydon
Application for food premises approval
Food Hygiene (England) Regulations 2006 /
Regulation (EC) No 853/2004

For help contact food.safety@croydon.gov.uk Telephone: 020 8760 5436

\* required information

Section 1 of 11		
You can save the form at any ti	me and resume it later. You do not need to b	pe logged in when you resume.
System reference		This is the unique reference for this application generated by the system.
Your reference		You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on beh	• •	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name		
* Family name		
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if you woul	d prefer not to be contacted by telephone	
Are you:		
<ul> <li>Applying as a business of</li> </ul>	r organisation, including as a sole trader	A sole trader is a business owned by one
<ul> <li>Applying as an individua</li> </ul>	I	person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
* Is your business registered in the UK with Companies House?	○ Yes ○ No	
* Registration number		
* Business name		If your business is registered, use its registered name.
* VAT number		Put "none" if you are not registered for VAT.
* Legal status		

Continued from previous page		
* Your position in the business	3	
Home country		The country where the headquarters of your business is located.
Registered Address		Address registered with Companies House.
* Building number or name		
* Street		
District		
* City or town		
County or administrative area		
* Postcode		
* Country		
Section 2 of 11		
ESTABLISHMENT FOR WHICH	I APPROVAL IS SOUGHT	
Trading name		
Business Address Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details
○ Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
Building number or name		
Street		]
District		
City or town		]
City or town  County or administrative area		
County or administrative area		
County or administrative area Postcode		
County or administrative area Postcode Country Section 3 of 11	NIMAL ORIGIN FOR WHICH APPROVAL IS SOL	JGHT
County or administrative area Postcode Country Section 3 of 11 TYPES OF PRODUCT(S) OF AN	NIMAL ORIGIN FOR WHICH APPROVAL IS SOL	
County or administrative area Postcode Country Section 3 of 11 TYPES OF PRODUCT(S) OF AN Indicate the product(s) of anin		

Continued from previous page  Mechanically separated meat  Meat products  Live bivalve molluscs (shellfish)  Fishery products  Dairy products  Eggs (not primary production) / egg products  Frogs' legs / snails
<ul> <li>Meat products</li> <li>Live bivalve molluscs (shellfish)</li> <li>Fishery products</li> <li>Dairy products</li> <li>Eggs (not primary production) / egg products</li> </ul>
<ul> <li>□ Live bivalve molluscs (shellfish)</li> <li>□ Fishery products</li> <li>□ Dairy products</li> <li>□ Eggs (not primary production) / egg products</li> </ul>
<ul> <li>☐ Fishery products</li> <li>☐ Dairy products</li> <li>☐ Eggs (not primary production) / egg products</li> </ul>
<ul><li>□ Dairy products</li><li>□ Eggs (not primary production) / egg products</li></ul>
Eggs (not primary production) / egg products
Frogs' legs / snails
☐ Rendered animal fats and greaves
☐ Treated stomachs, bladders and intestines
☐ Gelatine
☐ Collagen
Section 4 of 11
FOOD BUSINESS OPERATOR
Is the food business operator the same as the applicant in section one?  If "Yes" is selected you can re-use the details from section one, or amend them as require
Yes O No Select "No" to enter a completely new set of details.
Title
First name
Family name
Business Address
Is the address the same as (or similar to) the address given in section one?  If "Yes" is selected you can re-use the details from section one, or amend them as
○ Yes ○ No required. Select "No" to enter a completely new set of details.
Building number or name
Street
District
City or town
City or town  County or administrative area

I .	inued from previous page		
Busi	ness Contact Details		
Are t	he contact details the sam	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
0	Yes	○ No	required. Select "No" to enter a completely new set of details.
E-ma	nil		
Tele	ohone number		
Othe	r telephone number		
Full	Name Of Managers Of Th	ne Establishment	
First	name		
Fami	ly name		
		Add another manager	]
Full	Name Of Others In Contr	ol Of The Business	-
First	name		
Fami	ly name		
			,
		Add another controller	
		7.00.01.01.01.01.01.01	
	on 5 of 11		
USE	OF THE ESTABLISHMENT		
USE	OF THE ESTABLISHMENT	es will be conducted in / from the establishmen	t (check all that apply)?
USE	OF THE ESTABLISHMENT The of the following activitients Stand-alone cold store		t (check all that apply)?
USE	OF THE ESTABLISHMENT		t (check all that apply)?
USE	OF THE ESTABLISHMENT The of the following activitients Stand-alone cold store		t (check all that apply)?
USE	Ch of the following activitien Stand-alone cold store Wholesale market		t (check all that apply)?
USE	OF THE ESTABLISHMENT The of the following activities Stand-alone cold store Wholesale market Manufacture		t (check all that apply)?
USE	Ch of the following activities Stand-alone cold store Wholesale market Manufacture Other processing		t (check all that apply)?
USE	OF THE ESTABLISHMENT The of the following activities Stand-alone cold store Wholesale market Manufacture Other processing Packing		t (check all that apply)?
USE	OF THE ESTABLISHMENT The of the following activities Stand-alone cold store Wholesale market Manufacture Other processing Packing Storage	es will be conducted in / from the establishmen	t (check all that apply)?
USE	OF THE ESTABLISHMENT The of the following activities Stand-alone cold store Wholesale market Manufacture Other processing Packing Storage Distribution Cash and carry / wholesa	es will be conducted in / from the establishmen	t (check all that apply)?
USE	Catering (preparation of the Catering (prepar	es will be conducted in / from the establishmen	t (check all that apply)?
USE	Catering (preparation of the Catering (prepar	le food for consumption in the establishment) umers or other customers)	t (check all that apply)?
Whice	Catering (preparation of the Retail (direct sale to cons	le food for consumption in the establishment) umers or other customers)	t (check all that apply)?

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TRANSPORT OF PRODUCTS FROM THIS ESTABLISHMENT		
How will products be transported from the establishment (check all that apply)?		
☐ Your own vehicle(s)		
Contract / private haulier		
☐ Purchasers' own vehicle(s)		
☐ Other		
Section 7 of 11		
SUPPLY OF PRODUCTS FROM THE ESTABLISHMENT TO OTHER ESTABLISHMENTS		
Which of the following will be supplied with products from the establishment (check all that apply)?		
Other businesses that manufacture or process food		
☐ Wholesale packers		
Cold stores that are not part of the establishment to which this application relates		
Warehouses that are not part of the establishment to which this application relates		
Restaurants, hotels, canteens or similar catering businesses		
☐ Take-away businesses		
Retail shops, supermarkets, stalls, or mobile vendors that you own		
Retail shops, supermarkets, stalls, or mobile vendors that you do not own		
Members of the public direct from the establishment to which this application relates		
☐ Other		
Section 8 of 11		
OTHER ACTIVITIES ON THE SAME SITE		
Will any of the following activities be conducted on the same site as, or within, the establishment to which this application for approval relates?		
Slaughter, including pigs, sheep, cattle, poultry, Yes No game etc		
Cutting fresh (including chilled and frozen) meat, poultry Yes No meat or game:		
Storage of fresh (including chilled and frozen) meat, Yes No poultry or game:		

	nued from previous page
	on 9 of 11
INFO	PRMATION AND DOCUMENTATION
form	following information is required in order to process the application and should be submitted with this application if possible. Indicate which information you are sending now (N.B. information that is not submitted now will still be ired before the application can be determined).
	A detailed scale plan of the (proposed) establishment showing the location of rooms and other areas to be used for the storage and processing of raw materials, product and waste, and the layout of facilities and equipment
	A description of the (proposed) food safety management system based on HACCP principles
	A description of the (proposed) establishment and equipment maintenance arrangements
	A description of the (proposed) establishment, equipment, and transport cleaning arrangements
	A description of the (proposed) waste collection and disposal arrangements
	A description of the (proposed) water supply
	A description of the (proposed) water supply quality testing arrangements
	A description of the (proposed) arrangements for product testing
	A description of the (proposed) pest control arrangements
	A description of the (proposed) monitoring arrangements for staff health
	A description of the (proposed) staff hygiene training arrangements
	A description of the (proposed) arrangements for record keeping
	A description of the (proposed) arrangements for applying the identification mark to product packaging or wrapping
Secti	on 10 of 11
PROI	DUCTS TO BE HANDLED IN THE ESTABLISHMENT / ACTIVITIES
Whic	ch of the following activities will be conducted in the establishment?
Mino	ced Meat And Meat Preparations
Full	details of activities and specific products handled

Continued from previous page
How many tonnes of minced meat in total will be handled
in the establishment per week on average?
How many tonnos of most
How many tonnes of meat preparations in total will be
handled in the establishment per week on average?
Mechanically Separated Meat
Full details of activities and specific products handled
How many tonnes of mechanically separated meat
in total will be handled in the
establishment per week on average?
Meat Products
Full details of activities and specific products handled
Tuli details of activities and specific products flandicu
How many tonnes of meat
products will be handled in the establishment per week
on average?
Live Bivalve Molluscs (Shellfish) / Fishery Products
Full details of activities and specific products handled

Continued from previous page
How many tonnes of live bivalve molluscs (shellfish) / fishery products will be handled in the establishment per week on average?
Raw Milk / Dairy Products
Full details of activities and specific products handled
How many litres of raw milk will be handled in the establishment per week on average?
How many litres of dairy products will be handled in the establishment per week on average?
Eggs (Not Primary Production) / Egg Products
Full details of activities and specific products handled
How many tonnes of eggs will be packed in the establishment per week on average?
How many litres of egg products will be handled in the establishment per week on average?
Frogs' Legs And Snails
Full details of activities and specific products handled

Continued from previous page
How many tonnes of frogs' legs in total will be handled in the establishment per week on average?
How many tonnes of snails in total will be handled in the establishment per week on average?
Rendered Animal Fats And Greaves
Full details of activities and specific products handled
How many tonnes of rendered animal fats will be handled in the establishment per week on average?
How many tonnes of greaves will be handled in the establishment per week on average?
Treated Stomachs, Bladders And Intestines
Full details of activities and specific products handled
How many tonnes of treated stomachs in total will be handled in the establishment per week on average?

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How many tonnes of treated bladders in total will be	
handled in the establishment	
per week on average?	
How many tonnes of treated	
intestines in total will be	
per week on average?	
Gelatine	
Full details of activities	
How many tonnes of gelatine	
in total will be handled in the	
establishment per week on average?	
Collagen	
Full details of activities	
How many tonnes of collagen	
in total will be handled in the	
establishment per week on average?	
Stand-alone Cold Store	
Full details of activities and specific products handled	

Continued from previous page	
How many tonnes of product will be handled in the establishment per week on average?	
Section 11 of 11	
DECLARATION	
	ess operator of the establishment detailed in Part 1, for approval to use that establishment products of animal origin for which Regulation (EC) No. 853/2004 lays down requirements, as if this document.
☐ Ticking this box indicat	es you have read and understood the above declaration
This section should be comple behalf of the applicant?"	ted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	
* Capacity	
* Date	dd mm yyyy
continue with your application	uter by clicking file/save as /.uk/apply-for-a-licence/food-premises-approval-6/croydon/apply-1 to upload this file and
OFFICE USE ONLY	
Applicant reference number	
Fee paid	
Payment provider reference	
ELMS Payment Reference	
Payment status	
Payment authorisation code	
Payment authorisation date	
Date and time submitted	
Approval deadline	
Error message	
Is Digitally signed	