|  |
| --- |
| **IMPORTANT INFORMATION** |

**NOTE: YOU MUST NOT COMMENCE OPERATING UNTIL YOU HAVE BEEN GRANTED ACCREDITATION BY DAIRYSAFE.**

The application **must** be completed when:

* applying for accreditation as a dairy primary production business (dairy farm)
* a business changes ownership, relocates to another site; or
* a business seeks to add an activity to a current accreditation.

**Mandatory fields are marked with \* and must be completed for the Application to be processed.**

This form is to be completed and signed by the legal entity that owns the dairy business, the principal partner, or a person authorised on behalf of the company seeking accreditation according to the *Primary Produce (Food Safety Schemes) (Dairy) Regulations 2017*.

|  |
| --- |
| \*Applicant Details |

Accreditation can only be issued in the name of an individual or an incorporated body (an ACN registered company).

**Is the legal entity that owns the dairy business a:**

|  |  |
| --- | --- |
| Stop outline | Company (eg Dairy Farm Pty Ltd) |
| Stop outline | Individual (eg John Smith) |
| Stop outline | Partnership (eg John Smith and Mary Jones) |
| Stop outline | Trustee (eg John Smith as Trustee for Smith Family Trust or Dairy Food Pty Ltd ATF Dairy Trust) |
| Stop outline | Other (please state) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| \*Name of the Legal Entity |

**If applying as a company**:

Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACN (required if a company): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  |

**If applying as an individual, partnership or Trustee**:

If applying as an individual

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street/postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_

|  |
| --- |
|  |

If applying as a partnership

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street/postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street/postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_

|  |
| --- |
|  |

If applying as a Trustee

Name of Trustee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street/postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_

Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  |

Does the business trade under a different name to the legal entity? Yes No

If yes, what is the registered trading name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ABN (Required if a trading name is provided): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| \*Postal address |

Street/postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_

|  |
| --- |
| \*Farm/Dairy details |

**Address of the dairy**

Street/postal address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb/town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_

­

|  |
| --- |
| \*Key Contacts |

**Primary contact person** (all correspondence regarding the accreditation will be sent to this person)

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Food safety contact person responsible for audit**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Person responsible for accounts**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| \*Food Safety Arrangement: List the farm Food Safety Program details |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

­

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| \*Management Information |

| **In the last 5 years, have you, the company, any directors of the company or anyone in a management role been convicted of –** | **Yes** | **No** |
| --- | --- | --- |
| An offence against the *Primary Produce (Food Safety Schemes) Act 2004*, or the *Food Act 2001*, or any related Commonwealth, Territory or State law | □ | □ |
| An offence of dishonesty | □ | □ |
| An indictable offence | □ | □ |
| Please specify for individual applicants or body corporate applicants: |  |  |
| Have you / any director of the body corporate ever committed an offence against: |  |  |
| The *Primary Produce (Food Safety Schemes) Act 2004* | □ | □ |
| The *Food Act 2001* | □ | □ |
| A law of the Commonwealth or any State or Territory of the Commonwealth that corresponds to any of the above Acts | □ | □ |
| Have you / any director of the body corporate ever committed an offence of dishonesty | □ | □ |
| Have you /any director of the body corporate or entity which you/ they operate or have operated ever been the subject of any investigation/disciplinary/regulatory or legal process under a regulatory scheme relating to food or food production in South Australia or any other State or Territory of the Commonwealth? | □ | □ |

**\*** If the answer is **YES** to any of the above questions, please provide details of the offence and any penalties imposed. Please attach any relevant supporting documentation

|  |
| --- |
| \*Farm Stocking |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type(s) of milking animals:** | Cow | | | Goat |
| Buffalo | Camel | | | Sheep |
| **Milking stock:** (*in milk and dry*) | | | **Number of replacement stock:** | |
| 1. **If supplying to a LARGE-SCALE Processor** | | | | |
| **Name of Processor:** | | **Supplier number:** | | |
| **If supplying to a SMALL-SCALE Processor(s)** | | | | |
| **Name of Processor(s):** | | | | |
| **Quantity of Milk Supplied to Processor(s)** | | | | |
| 1. **Complete if you have any additional dairy related activities/ accreditations:** | | | | |
| **Please select:  FARM  TRANSPORT  PROCESSOR** | | | | |
| **Name of accreditation(s):** | | | | |
|  | | | | |
| **Accreditation Number(s):** | | | | |

|  |
| --- |
| \*Declaration |

By signing and submitting this application, I declare I am the applicant, or I am authorised to complete this application on behalf of the applicant and all information provided in this application is true and correct. I make this declaration with the understanding that it is an offence under Section 38 of the *Primary Produce (Food Safety Schemes) Act 2004* to provide false or misleading statements in connection with information provided under the Act. I acknowledge that an application fee of $100 is payable on receipt of the invoice, (which will be issued by Dairysafe when this application has been received).

First Name Surname

Date Signature

|  |
| --- |
| Submitting Your Application |

Please check that all mandatory fields have been completed and submit the form by post or email to:

Dairysafe │ 136 Glen Osmond Road, Parkside, SA, 5063 │ Email: [admin@dairy-safe.com.au](mailto:admin@dairy-safe.com.au)

|  |
| --- |
| Privacy Statement |

Dairysafe collects personal information relating to accredited operators to fulfill its requirements under the *Primary Produce (Food Safety Schemes) Act 2004*. Personal information collected may include but is not limited to, information such as:

* Name, address, and contact details
* Information regarding the operations of your business

Dairysafe is committed to protecting personal information. Information provided by the applicant will be used to provide accreditation and monitoring services, administer, and manage administrative systems, and provide information to accredited businesses.

Information will be managed per the *Privacy Act 1988* and the *Freedom of Information Act 1991*. For public health and safety reasons and for managing food safety generally, Dairysafe may disclose personal information to other agencies or entities. Information may also be used for statistical research or related purposes.

Additionally, section 40 of the *Primary Produce (Food Safety Schemes) Act 2004* addresses confidentiality and requires:

*A person must not divulge any information relating to business processes or financial information obtained (whether by that person or some other person) in the administration or enforcement of this Act except—*

*(a) as authorised by or under this Act; or*

*(b) with the consent of the person from whom the information was obtained or to whom the information relates; or*

*(c) as reasonably required in connection with the administration or enforcement of this Act; or*

*(d) for the purpose of any legal proceedings arising out of the administration or enforcement of this Act.*

*Maximum penalty: $10,000*

|  |
| --- |
| CONDITIONS OF ACCREDITATION |

Pursuant to Section 16 of the *Primary Produce (Food Safety Schemes) Act 2004* and regulation 17 of the *Primary Produce (Food Safety Schemes) (Dairy) Regulations 2017*, the following conditions make up the Approved Food Safety Arrangement for this accreditation.

**DAIRY PRIMARY PRODUCTION BUSINESS**

Milk is to be produced in accordance with the requirements of the Australia New Zealand Food Standards Code, specifically standards: -

* 4.2.4 - Primary Production and Processing Standards for Dairy Products
* 3.1.1 - Interpretation and Application
* 3.2.1 - Food Safety Programs
* 3.2.2 - Food Safety Practices and General Requirements
* 3.2.3 - Food Premises and Equipment

A Dairy Primary Production Business shall control it’s potential food safety hazards by implementing a documented food safety program. This program must include; Good Manufacturing Practices (GMPs) and Standard Sanitation Operating Procedures (SSOPs).

**PRODUCTION OF MILK**

Milk must only be produced, transported, and processed by accredited[[1]](#footnote-1) businesses.

Raw milk must only be supplied to an accredited dairy processing business.

**SURVEILLANCE AND NOTIFICATION**

The business must fully cooperate with any official State product, environment or surveillance programs as required by the Chief Executive Officer.

**VERIFICATION**

The frequency and number of audits and inspections of the dairy farm is determined by Dairysafe. The cost of routine surveillance audits is included in the annual accreditation fee. Where serious non-conformance is identified and follow up is necessary the cost will be borne by the accredited operator.

The dairy primary production business must comply with all directions from the Chief Executive Officer, Authorised Officer, or Approved Auditor appointed by Dairysafe, in respect of the primary production business. Dairysafe shall be notified in writing prior to any significant changes with the Approved Arrangement, at change of supply to a dairy processor, a change of business ownership or should the business cease production.

1. **registered export or licensed with an interstate regulatory food authority** [↑](#footnote-ref-1)