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| **IMPORTANT INFORMATION** |

**NOTE: YOU MUST NOT COMMENCE OPERATING UNTIL YOU HAVE BEEN GRANTED ACCREDITATION BY DAIRYSAFE. DAIRYSAFE IS UNABLE TO ISSUE ACCREDITATION FOR A DOMESTIC KITCHEN.**

The application **must** be completed when:

* applying for accreditation as a dairy processing business
* 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*.

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| \*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 Food 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) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| \*Name of the Legal Entity |

**If applying as a company**:

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

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

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**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: \_\_\_\_\_\_\_

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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: \_\_\_\_\_\_\_

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If applying as a Trustee

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

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

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

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

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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): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \*Postal address |

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

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

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| \*Premises details |

**Premises address**

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

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

Phone number: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \*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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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| \*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 Act | □ | □ |
| 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

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| \*Product Information |

**What type of milk will be used at the premises:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Cow  | □ | Sheep | □ | Goat | □ | Buffalo | □ | Camel | □ |
| **Yes** | **No** |

**Do you receive raw milk or cream at the premises:** □ □

**Type of dairy products manufactured:**

Please indicate the types of products you want included in this accreditation:

|  |  |
| --- | --- |
| Stop outline | pasteurised milk |
| Stop outline | cream |
| Stop outline | UHT milk  |
| Stop outline | high-acid fresh cheese |
| Stop outline | low-acid fresh cheese |
| Stop outline | grated cheese |
| Stop outline | soft cheese |
| Stop outline | hard cheese |
| Stop outline | dried milk powder |
| Stop outline | high-acid dairy dips |
| Stop outline | infant formula |
| Stop outline | dairy desserts |
| Stop outline | yoghurt |
| Stop outline | salted butter |
| Stop outline | ice cream |
| Stop outline | unsalted butter & spreads |
| Stop outline | transport of raw milk or dairy product |
| Stop outline | other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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**Raw milk or dairy products received from own or accredited dairy farmers or accredited processor:**

Please indicate the estimated litres for the current financial year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate the estimated kilograms for the current financial year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \*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

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| 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

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| 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*

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| 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.

**MANUFACTURE AND PROCESSING OF DAIRY PRODUCTS**

Dairy products are to be processed per the requirements of the Australia New Zealand Food Standards Code, specifically standards:-

* 4.2.4 - Primary Production and Processing Standards for Dairy Products
* 1.2 - Labelling (ingredient, allergens, date marking)
* 1.3.1 - Food Additives
* 1.3.3 - Processing Aids
* 1.6.1 - Microbiological Limits for Food
* 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; and
* the South Australia *Food Act 2001*

Where applicable, processing must comply with Australian Standard AS 3993 - Equipment for the pasteurization of milk and other liquid dairy products - Continuous-flow systems, except where equivalence can be demonstrated.

Manufacture of all dairy products shall be effectively controlled and managed through a documented food safety program. This program must include: a Hazard Analysis Critical Control Point (HACCP) plan, Good Manufacturing Practices (GMPs), and Standard Sanitation Operating Procedures (SSOPs).

The documented food safety program must be consistent with the Dairysafe ‘Guidelines for the safe manufacture of dairy products’, and the Food Standards Australia New Zealand ‘Compendium of microbiological criteria for food’, unless equivalence can be demonstrated.

**SOURCING DAIRY PRODUCTS**

Milk and dairy products must only be sourced and transported from an accredited[[1]](#footnote-2) dairy farmer, dairy processor, or dairy transporter.

**SURVEILLANCE AND NOTIFICATION**

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

It is the responsibility of the business to notify Dairysafe in the event of a pathogenic organism detection, or if inhibitory substances exceed MRL’s, within 24 hours of the initial indication of the result. A subsequent detailed written Corrective Action Plan shall be provided within seven (7) working days.

**SUPPLY OF DAIRY PRODUCTS**

Raw milk must only be supplied to an accredited dairy producer.

Where involved in transporting milk or dairy products to or from another State or Territory for processing:

* The processing premises to which the milk or dairy product is transported must be, and remain, accredited as such by the relevant State or Territory regulatory body.

The processor must advise Dairysafe within 24 hours of:

* any action taken by any State regulatory body to suspend, cancel, revoke, or vary its interstate processors accreditation or any other accreditation relating to milk or dairy products.
* any action taken by any State or Territory regulatory body to prosecute it or any of its officers or employees for breach of dairy legislation codes.
* Any decision to terminate or change the nature or location of its processing business or premise.

**VERIFICATION**

The frequency and number of audits and/or inspections of the accredited entity is determined by Dairysafe. The cost of domestic surveillance audits and inspections is included in the annual accreditation fee. Where non-conformance is identified, and follow-up action is necessary, the cost of the audit will be borne by the accredited operator.

A system must be implemented to routinely test milk hygiene and quality from all dairy farms supplying the dairy processor.

A schedule for microbiological testing must be developed for finished product. Test requirements and frequency are outlined in the Food Standards Australia New Zealand ***‘Compendium of microbiological criteria for food’***. A schedule for confirming environmental hygiene must also be implemented.

The accredited entity must comply with all directions from the Chief Executive Officer, Authorised Officer, or Approved Auditor appointed by Dairysafe, regarding the dairy processing operation. Notification in writing is required before any variation to the accreditation, including significant changes in production, the Approved Arrangement, or business ownership.

1. **registered export or licensed/accredited with an interstate regulatory food authority** [↑](#footnote-ref-2)