

# Application for Certificate of Food Stall Registration

## Details of Stall Operator

Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

Fax No: \_\_\_\_\_

## Details of Stall

Trading name of stall: \_\_\_\_\_

Type of food to be sold: \_\_\_\_\_

Location of the stall or event name: \_\_\_\_\_

***Please send this form, along with the registration fee of \$60.00 to:***

Matamata-Piako District Council

POBox 266

Te Aroha, 3342

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Office Use Only

Charge code: 429001/560

Receipt No.: \_\_\_\_\_

Date of Issue: \_\_\_\_\_

Date Received