Notification of Conviction Online Form

Note: this form to be emailed to foodsafety@health.wa.gov.au once completed and within 14 days of conviction. Please retain a copy of this form for your records.

\*Relates to any person (individual or body corporate) who is convicted or whose employee or agent is convicted.

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| **Enforcement Agency Name:** |       |
| **Date of conviction:** |       |
| **Name of food business:** |       |
| **Name of person/s\* convicted:** |       |
| **Address of food business where offence was committed:** |       |
| **Date/s of offence:** |       |

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| **Section of Act/Subsidiary Legislation** | **Details of offence** | **Penalty imposed** |
| *e.g. Food Act 2008 Section 22 (compliance with Food Standards Code)* | *Non-compliance with Standard 3.2.2** *clause 7 – food processing*
* *clause 19 – cleanliness of premises*
 | *$20,000 plus costs of $750* |
|       |       |       |
|       |       |       |