|  |
| --- |
|  |
| **2022 Food NI Food to Go Application****PROVIDER OF HIGH QUALITY LOCALLY SOURCED STREET FOOD AND CATERING****Please complete this form if you are interested in being listed with****Food NI as a high quality ‘street food’ provider. Please note a successful application form is subject to meeting criteria. Return this form****with your payment to us as soon as you can.** | **FOR OFFICE USE ONLY** |
|  | Signature |  |
|  |  |  |
|  |
|  | Date Received |  |
| Invoiced |
| Membership Fee \*£ |
|  |
|  |

**COMPANY DETAILS:** (this address and contact details will appear on any marketing literature and on invoices). Charity Sole Trader Partnership Limited

**l**

Name of Business....................................................................................................................................................................................................... Address.......................................................................................................................................................................................................................

........................................................................................................................................................ Post Code.........................................................

Tel No............................................................................................... Fax No.......................................................................................................... Email...................................................... Website/ Twitter/ Facebook URL.............................................................................................................

**\*Please regularly check** [**www.nigoodfood.com a**](http://www.nigoodfood.com/)**nd send us information relevant to your product(s)/company as all member news will be promoted by Food NI at any given opportunity.**

**CORRESPONDENCE DETAILS:** (general correspondence will be sent via email or to this address).

Contact Mr/Mrs/Miss/Ms....................................................................................................................................................................................... Address (if different from above)..............................................................................................................................................................................

........................................................................................................................................................ Post Code.........................................................

Do you also have a restaurant/café/shop/eating establishment? YES NO

If so, is this restaurant/café/shop/eating establishment a member of Food NI or Taste of Ulster? YES NO Please tick the nature of your facility:

Self-contained Trailer unit Gazebo Set Up Other Please state: …………………………………………………………………….……

Please tell us what **type of food** you provide to the public and **attach a menu with this application form.**

Please list 3 of your **suppliers**: 1) …………………………………… 2) ……………………………… 3) ………………………………………………

What events are you interested in attending?

--------------------------------------------------------------------------------------------------------------------------------------------------------------------

Please state your **Food Registration Authority** (Council Name) ………………………………………………………………………………………………………………

Please state the **PLACE** and **DATE** of your **last inspection.** (This may be checked.) **Place** ………………..………… **Date** …………………………..….

Please tell us the **Food Hygiene Rating** of your Street Food facility: ………………………………………………………………………

**INSURANCE:** All stands must have full, valid insurance including public liability insurance. Please give details below of your insurance policy

**and attach a copy of your full insurance to this application.**

Insurance Company.................................................................................................................................................................................................... Policy Number................................................................................... Public Liability Limit....................................................................................

 **COMPANY MARKETING INFORMATION**

Please provide a brief description of your company (bullet points accepted), please note this may be used in marketing materials:

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

....................................................................................................................................................................................................................................

**Payment terms: Strictly 30 days**

We will invoice you for your membership when you join as a new member / or as it expires. Cheques should be made payable to Food NI Limited please. Thank you. **BACS:** (Sort Code 98-04-40 Account Number 10222454)

**If you pay via BACS, please include your company name and/or invoice number on the payment. Please email remittance to** Lindsay@nigoodfood.com

**AGREEMENT**

Acceptance of this application by Food NI will create a legally binding contract. Please refer to the event criteria below that should always be adhered to. If you have any questions about this, please contact Food NI on 028 90 249 449.

**I/We hereby apply to be a Food NI Food to Go member and agree to the terms and conditions on this application form. We agree to pay the membership fee within 30 days.**

Signature............................................................................................ Print Name................................................................................................... Position.............................................................................................. Company...................................................................................................... Email.................................................................................................. Date.............................................................................................................

\*\* Completion of this form is not a guarantee of successful entry. \*\* We will notify you if you have met the criteria to become a member of

Food NI. \*\*

**CHECK LIST**: PLEASE MAKE SURE YOU INCLUDE THE FOLLOWING WITH YOUR APPLICATION FORM.

 Application Form

 Terms and Conditions signed and dated - see next page.

 Full insurance documentation

 Relevant Food Hygiene Certificates

 Gas certification (if applicable)

 Copy of menus

Please post full application and all documentation to

**Food NI, Belfast Mills, 71-75 Percy Street, Belfast, BT13 2HW**

**Terms and Conditions for Street Food exhibiting at NI Events**

 A list of local food and drink companies is available on request.

 All food and drink provided must enhance the reputation that Northern Ireland has as a food and drink producing region.

 Companies **MUST** source, use and promote Northern Ireland produce where possible. Random checks will be carried out at events. Prior warning will not be given.

 Companies must use high quality, seasonal produce at all times. Companies are to provide authentic and innovative produce where possible.

 Companies are encouraged to promote local ingredients, e.g. Glenarm Shorthorn Beef Burgers, or Co. Down grown strawberries with Clandeboye Estate Yoghurt.

 All Beef, Lamb (including burgers, and other ancillary products) must be produced in Northern Ireland and be Farm Quality Assured produce. Beef and Lamb must meet all relevant accreditation standards. Proof of sourcing must be provided and may be checked at each event.

 All Pork (including bacon, sausages and all pigmeat), must be produced in Northern Ireland and must meet all relevant accreditation standards.

 All Venison must be Northern Irish and meet all relevant accreditation standards. Proof of sourcing must be provided and may be checked at each event.

 Poultry sourced from Northern Ireland is preferable. Where poultry is not available, full traceability must be supplied, and the produce must meet relevant accreditation standards.

 Other meat such as Veal must be sourced from Northern Ireland and meet relevant accreditation standards.

 Eggs must be sourced from Northern Irish farms, and must meet the relevant accreditation standards. Free range eggs where possible.

 All bottled water must be from Northern Ireland.

 All ‘traditional’ Northern Irish dishes such as Vegetable Broth, Ulster Fry, Irish Stew, must be made using high quality, fresh ingredients that meet this criteria.

 All soft fruit / berries must be Northern Irish.

 All potatoes i.e. baked potatoes, boiled etc. must be from Northern Ireland. All chips must be sourced from Northern Ireland, and must be made from Northern Ireland potatoes. Proof of sourcing must be provided. Where there is a NO CHIPS policy at an event, you must not provide chips.

 As far as possible, all other fruit and vegetables (i.e. apples, salad greens, tomatoes, root vegetables etc.) must be grown in Northern Ireland, high quality, seasonal produce and meet all relevant assurance accreditation. Products not available in the UK must be Fairtrade (e.g. bananas)

 All milk, cheese, cream, ice cream and yoghurt must be Northern Irish.

 All bread rolls and baps should be locally sourced, and baked in Northern Ireland. All other bakery products (e.g. cakes, shortbread, oatcakes) should be produced in Northern Ireland with ingredients traced back to source.

 All fish, including farmed and wild caught fish, seafood and shell fish must be from Northern Ireland, and meet all relevant accreditation standards.

 All sauces must be made in Northern Ireland with proof of ingredients given.

 All tea and coffee must be from Northern Ireland companies. Sugar should be high quality and Fairtrade where possible.

 All alcohol served (subject to licensing laws) must be produced in Northern Ireland where possible, e.g. cider, beer, whiskey, vodka and gin. Where it has not been possible to source alcohol from a Northern Irish producer, proof of traceability must be given.

 All other products should be produced in Northern Ireland, where possible, and meet the accreditation standards or equivalent. Where not available in Northern Ireland, products MUST be fully traceable and of a very high standard.

 Use of Northern Ireland organic / ethically sourced produce across all categories is encouraged where possible.

 ALL waste must be removed from the event site by the food-to-go provider. Food NI is not responsible for any waste left on site.

 All food handling and storage/delivery must apply with the law. All food records, and relevant health and safety records are the responsibility of the provider, and must be kept up to date. ALL STAFF must receive relevant Food Safety Training.

 All hand washing and equipment washing facilities are the responsibility of the food provider, and adequate facilities must be provided at each event. **Please sign, date, and make a copy of this to keep.**

**Please return one copy to Food NI with your application.**

**Signed ………………………………………………………………………………….. Date: ……………………………………………………………………………………**