CERTIFICATE OF COMPLIANCE (Category 1 requirements)

		Ι, _			(), holder of (ame in Chinese)	
			(Surname)	(Other Names)	(N	fame in Chinese)	
Appli author Autho	cant rized orize	/ the lice l person i d Person	ensee / the per n case the app / Registered	mittee / the appl plicant / the licer	icant's / the nsee / the po neer* registe	XXX(X), being the licensee's / the permittee's* ermittee* is a company / the ered under section 3 of the (permit)	
					Lic	ence/Permit at the premises	
know	n as						
					((Shop sign in Chinese)	
		(Shop sign	in English)			(Shop sign in Chinese)	
and s	ituat	ed at					
				(Address o	f Premises)		
do he	reby	certify an	d declare as fo	ollows :			
(i)	OR	All requires Memora Unit (IC	uirements stip ndum issued 1 U)* and copie	ed to the abovena (dd/mm/yyyy) ^(Note 1) In bulated in the Laby the Buildings ed to the abovena (yyyy) ^(Note 2) (file ref.	amed application and application application application application application amed application amed application amed application applic	requirements in the Letter of ant/licensee/permittee* dated lly complied with. gory 1 requirements in the (BD)/Independent Checking ant/licensee/permittee* dated) have	
	I ha				by inspection	of the subject premises on	
		(Date of Inspection)					
(ii)	I also affirm that I have read the said Category 1 requirements and understood the contents thereof, and that I understand that all matters covered by this Certificate may be subject to further verification by the Director of Food and Environmental Hygiene (Dof FEH). I also understand that if I provide information that is false or misleading in a material particular or furnish the D of FEH, an authorized officer or a public officer with information knowing that it is false or misleading in a material particular in this Certificate, I shall render myself liable to disciplinary action under section 7 of the Buildings Ordinance (Cap. 123) and/or other legal penalties.						
						Date (dd/mm/yyyy)	
Note 1	: D	ate of the L	etter of Requirem	ents or letter conveyi	ng revised com	ments of the BD/ICU/Architectural	

Note 2: Date of the Memorandum issued by the BD/ICU, whichever is the latest, should be stated.

Services Department issued by the Food and Environmental Hygiene Department, whichever is the

latest, should be stated.

Signature and full name of applicant/licensee/permittee/authorized person in case	
the applicant/the licensee/the permittee* is a company*	
.	
C:	
Signature and full name [#] of Authorized Person/ Registered Structural Engineer*:	
Certificate of registration number #:	
Date of expiry of registration #:	(dd/mm/yyyyy)
Date of expiry of registration .	(dd/IIIII/yyyyy)
Correspondence address :	
Contact telephone number :	
Contact fax number:	
Contact email address:	
Name of company/partnership firm*:	
(if Authorized Person/Registered	
Structural Engineer* is an employee/ Director/partner* of a company/	
Partnership firm*)	
	Company Chop
* Please delete where appropriate.	
☐ Please tick the appropriate box(es).	

#

Please tick the appropriate box(es).

In accordance with the registration record.

Collection of Personal Data in Connection with Application for Food Business and Other Trade Licences/Permits or Application for Alteration to the Approved Plan of Licensed/Permitted Premises In accordance with the Personal Data (Privacy) Ordinance

Statement of Purpose

1. Purposes of Collection

The personal data provided by means of this form will be used by the Food and Environmental Hygiene Department (FEHD) for:

- (a) activities relating to applications for the issue of food business and other trade licences/permits made to the FEHD;
- (b) activities relating to applications for alteration to the approved plan of licensed/permitted premises made to the District Environmental Hygiene Office/Licensing Section of the FEHD; and
- (c) facilitating communication among the staff of the FEHD, other government departments and you concerning compliance with the laws and regulations applicable to the food business and other trades.

The provision of personal data by means of this form is voluntary. However, if you do not provide sufficient information, the FEHD may not be able to process your application.

2. Class of Transferees

The personal data which you have provided by means of this form may be disclosed to other government departments, bureaux, organisations or any persons for the purposes mentioned in paragraph 1 above.

3. Access to Personal Data

You have the right of access and correction with respect to the personal data as provided under Personal Data (Privacy) Ordinance. Request for personal data access and correction should be addressed to FEHD. FEHD has the right to charge a reasonable fee for the processing of any data access request.