





Application Form

NATIONAL CODE OF PRACTICE FOR REMOTE STORE OPERATIONS

AND

LOW-COST ESSENTIALS SUBSIDY SCHEME

When to use this form

Use this form if you want to apply:

- to be enrolled to participate in the National Code of Practice for Remote Store Operations (Code) and/or Register a Store under the Code
- (b) to be enrolled to participate in the Low-Cost Essentials Subsidy Scheme (Scheme) and/or Register a Store under the Scheme.

Important information

Before completing this application, read:

- [if applying for the Code] the National Code of Practice for Remote Store Operations Guidelines 2025 (Code Guidelines) and National Code of Practice for Remote Store Operations Rules 2025, and
- [if applying for the Scheme] the Low-Cost Essentials Subsidy Scheme Guidelines 2025 (Scheme Guidelines) and Low-Cost Essentials Subsidy Scheme Rules 2025.

They are available at www.niaa.gov.au/code-sign-up. Unless stated otherwise, words and expressions in this form have the same meanings as in the Code, Code Guidelines and Scheme Guidelines.

Giving false or misleading information is a serious criminal offence under the Commonwealth Criminal Code.

If the applicant isn't satisfied with a decision that the NIAA makes about dealing with this application, it can make a complaint to the NIAA about the matter. Complaints must include specific information listed in Part 4 of the Code Guidelines and Scheme Guidelines.

Filling out this form

Fill this form out physically or electronically. If filling the form out physically, and when signing the document, **use black or blue pen.**

Print in BLOCK LETTERS. Answer all questions that apply to the applicant or the applicant's Stores.

This form is split into parts:

- [if applying for the Code] fill out Part A ("About the applicant"), Part B ("Applying for Code Registration") and Part D ("Execution") of this form
- [if applying for the Scheme] fill out Part A, Part C ("Applying for Scheme Registration") and Part D of this form
- [if applying for the Code and the Scheme] fill out Part A, Part B, Part C and Part D of this form.

Signing and lodging this form

You must sign and lodge a physical copy of this form, even if you fill it out electronically. If you fill the form out electronically, you will be sent a copy of your form (including attachments) to print, sign and lodge once you have answered all questions that apply to you and your Store.

Lodge this signed Application Form, together with all documents that this form says are to be provided, by:

- (a) sending them as attachments to an email addressed to remotefoodsecurity@niaa.gov.au, or
- (b) uploading them at www.niaa.gov.au/code-uploads.

The applicant will get confirmation the application has been received by NIAA shortly after lodging.

Documents to be provided with this form

This form may ask the applicant to provide documents to the NIAA. The applicant provides them by giving the NIAA digital copies as part of lodging this form.

Applications may not be considered for approval until copies of all requested documents have been provided.

For more information

For more information on how to complete and lodge this form, go to www.niaa.gov.au/code-sign-up. Send any enquiries about an application, in writing, to remotefoodsecurity@niaa.gov.au.





Application Form

for the NATIONAL CODE OF PRACTICE FOR REMOTE STORE OPERATIONS and LOW-COST ESSENTIALS SUBSIDY SCHEME

PRIVACY NOTICE

Why do we collect your personal information?

The NIAA collects your personal information to:

- (a) administer the low-cost essentials subsidy scheme (the Subsidy Scheme), and
- (b) ensure compliant with the Code.

What do we collect?

The NIAA collects your name, address, email address, telephone number and signature.

Who do we disclose your personal information to?

We may disclose your personal information to:

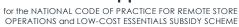
- (a) Monash University and / or the Office of the Registrar of Indigenous Corporations so they can contact Code Participants to assist Code Participants to comply with the Code
- (b) an organisation engaged by the NIAA to check how well the Code works and if Code Participants are following the Code
- (c) the Commonwealth Ombudsman to help with a complaint
- (d) a court or tribunal if the law permits this
- (e) other federal, state or territory government agencies (including the Australian Competition and Consumer Commission), and
- (f) Government ministers and the parliament for accountability.

We may publish information about your store being a part of the Subsidy Scheme. This will not include personal information.

Find out more

You can read more about privacy in the Subsidy Scheme Guidelines and Code Guidelines for more information. These also tell you how to contact the NIAA's Privacy Officer.







PART A ABOUT THE APPLICANT

Fill out this part of the form if applying for the Code and/or the Scheme.

٨.1	Applicant's name (this i	s the legal name of the applicant)	the type of entity the appructions.	olicant is. Select ONE only and follow the
			Individual (sole trader)	
		egal name of the applicant (eg ABC Pty Ltd), not a ich the applicant trades. It should match the ABN	ABN	
	provided at A.4.	ich the applicant trades. It should match the Abin		
٩.2	List all trading names u	nder which the applicant owns and operates	Go to item A.10.	
	Stores		Company under the Con	rporations Act 2001
		not limited to, the Remote Community Store or Stores	ACN	
	that the applicant seeks to	be registered for the Code and/or Scheme.	ABN	
			Go to items A.5, A.6,	A.10 and A.12.
			Company under the Con Islander) Act 2006	porations (Aboriginal and Torres Strait
			Indigenous	
			Corporation Number (ICN)	
			ABN	
			ABIN	
	If more snace is needed in	rovide a separate page with details.	► Go to items A.5, A.6,	A.10 and A.12.
				including Commonwealth, state or
4.3	Applicant's contact det	alls:	territory and local gove	rnment corporations) vhich the applicant is incorporated?
	Key contact Name		What is the Act under v	which the applicant is incorporated:
	Phone number			
	Web address		ABN	
	(if there is one)		Go to items A.6 and A	1.10
	Physical address		Other government entit territory and local gove	ty (including Commonwealth, state or rnment authorities)
			ABN	
			Go to item A.10.	
			Partnership	
	State/territory	Postcode	ABN	
	State/territory	rositoue	Go to items A.9 and A	1.10
	Email address for service NIAA	ce of notices and other communications from	Incorporated associatio	
			What state or territory	is the applicant incorporated in?
	NOTE: Other addresses ma	who valid for consider		
	NOTE: Other addresses ma			
	Postal address for servi NIAA	ce of notices and other communications from	ABN	
			Incorporation	
			number (or equivalent)	
			Go to items A.7 and A	l. <i>8</i> .
	State/territory	Postcode		
	NOTE: Other addresses ma	y be valid for service.		

The following items relate to particular kinds of entities. Only fill in the information that relates to the kind of entity that the applicant is.

IF THE APPLICANT IS:

A COMPANY UNDER THE CORPORATIONS ACT 2001 OR CORPORATIONS (ABORIGINAL AND TORRES STRAIT ISLANDER) ACT 2006 —

A.5	Who are the ap	oplicant's directors?
		etails of up to 4 directors, as applicable. A Director ID is a directon the provided by the Australian Business Registry Services.
1	Name	
	Director ID	
2	Name	

A.6 Who are the applicant's Chief Executive Officer (**CEO**) and Company Secretary, or equivalents?

NOTE: Provide the following details if the applicant is a company under the *Corporations Act 2001* or *Corporations (Aboriginal and Torres Strait Islander) Act 2006* or a statutory corporation.

CEO or equivalent

Director ID

Name	
Position/title	
Director ID	
Company secre	etary or equivalent
Name	
Position/title	

Go to item A.10.

AN INCORPORATED ASSOCIATION —

A.7 Who are the members of the applicant's board, committee of management or equivalent?

1	Name						
	Position/title						
2	Name						
	Position/title						
	L						
3	Name						
	Position/title						
	If more than 3 me	mbers, p	rovide a s	separate	page with	details.	
4.8	Who is the appli	icant's (CEO or ed	quivalen	t?		
	Name						

Go to item A.10.

Position/title

A PARTNERSHIP —

A.9 Who are the partners in the partnership?

For partners	who are	individual	c
ror parmers	wno are	maividuai	5

	Nam	e										
-												
r												
-												

If more than 5 partners are individuals, provide a separate page with details.

For partners who are not individuals (eg companies or statutory bodies):

Name		
Type of entity (see item A.4)		
ACN (if applicable)		
ABN		
ARBN (if applicable)		

Name		
Type of entity		
(see item A.4)		
ACN (if applicable)		
ABN		
ARBN (if applicable)		

If more than 2 partners are not individuals, provide a separate page with

Provide a separate page with the information required by items A.5, A.6, A.7 and A.8 for each partner who is not an individual.

► Go to item A.10.

A.10 Is the applicant operating the business as trustee of a trust?

☐ Yes Go to item A.11. ☐ No Go to item A.12.

A.11 If yes, is the applicant entitled to be indemnified out of the assets of the trust?

☐ Yes ☐ No ► Go to item A.12.



A.12 If the applicant is a company under the *Corporations Act 2001* or *Corporations (Aboriginal and Torres Strait Islander) Act 2006*, list all the related bodies corporate of the applicant (eg subsidiaries, parent companies):

NOTE: a predecessor business counts as a related body corporate.

1	Name	
	Type of entity	
	(see item A.4)	
	ACN (if applicable)	
	ABN	
	ARBN (if applicable)	
2	Name	
	Type of entity	
	(see item A.4)	
	ACN (if applicable)	
	ABN	
	ARBN (if applicable)	
3	Name	
	Type of entity	
	(see item A.4)	
	ACN (if applicable)	
	ABN	
	ARBN	

If more than 3 related bodies corporate, provide a separate page with details.

If there are more than 5 related bodies corporate, provide a structure diagram showing the corporate relationships between them and the applicant.

Provide a separate page with the information required by items A.5, A.6, A.7 and A.8 for each related party that is a body corporate.

This is the end of Part A.

(if applicable)

If details have been provided for all relevant items in the Part, got to:

- Part B if you are applying to be a Code Participant, or for a Store to be Code Registered
- Part C if you are applying to be a Scheme Participant, or for a Store to be a Scheme Registered Store

 ${\sf NOTE: Code\ Participation\ is\ a\ pre-condition\ to\ Scheme\ Participation.}$





Application Form

for the National Code of Practice for Remote Store Operations and Low-Cost Essentials Subsidy Scheme

PART B APPLYING FOR CODE REGISTRATION

Fill out this part of the form if applying for the Code.

By completing and lodging this Part B of the Application Form, you agree that:

- you have read and understood the Code, the Code Guidelines and the National Code of Practice for Remote Store Operations Rules 2025 (Code Rules). and
- NIAA may Fully Register or Conditionally Register each Store described in Part B of this Form in accordance with the Code Guidelines.

NOTE: A Store may be Conditionally Registered under the Code if the applicant complies with some but not all of the Minimum Standards at the Store AND there is a reasonable pathway for the applicant to meet the Minimum Standards that it does not comply with (each a **Non-Compliant Standard**). Information about Conditional Registration, including how a Store can move from Conditional Registration to Full Registration, is at [3.5] and [3.6] of the Code Guidelines.

Words and expressions in Part B have the same meanings as in the Code, Code Guidelines and Code Rules.

The applicant must satisfy the following requirements to be emolied as a co	de l'articipant.				
(a) the applicant must be a legal person	See item A.4.				
(b) the applicant must be the Store Owner of at least one Remote Community Store	NOTE: A Store Owner does not include a person operating the Store as a store management services provider, or who is otherwise engaged by another person to operate the Store.				
(c) the applicant must have an ABN or ARBN for each Store included in this Application Form	See item A.4.				
(d) the applicant must demonstrate that it complies with Minimum Standards in respect of at least one Remote Community Store (Store) that it owns.	See B.8- B.24, below.				

ABOUT THE APPLICANT

Provide the following details of the applicant	Provide	the	following	details	of the	applicant
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	ac the following actuals of the applicants		
B.1	Is the applicant enrolled as a Code Participant at the time of lodging this Application Form?	☐ Yes ► Go to item B.3.	□ No Go to item B.2.
B.2	The applicant agrees that, on receiving notice from NIAA that it is	☐ Yes	□ No
	enrolled as a Code Participant and for as long as the applicant is enrolled as a Code Participant, it will perform its obligations under the Code and Code Rules in respect of each Store it owns that is Registered under the Code.	► Go to B.3.	

STORES TO BE REGISTERED FOR THE CODE

This section of the Application Form is also available as a separate attachment at www.niaa.gov.au/code-sign-up. If the applicant is seeking Code Registration for more than 1 Store, fill out and provide a separate attachment for each Store when lodging this Application Form.

Provide details of each Store the applicant has, and that the applicant is seeking Code Registration for.

В.3	Name of the Store		B.5	The Store's ABN:
				NOTE: The ABN can also be the ABN for another Store.
B.4	The Store's physical address		В.6	The Store's contact details:
				☐ If the Store's contact details are the same as those provided at A.3, tick this box and go to item B.7.
				Key contact name
	State/territory	Postcode		Phone number
				Web address (if there is one)



	Emai NIAA		ervice of notices and other communications from		tails of evant)	the other Com	muni	ties the Store s	ervice	es (if
	NOTE	: Other addresse	es may be valid for service.							
	Posta NIAA		service of notices and other communications from							
						xtent is the Sto ery Items to the		significant sour ommunities?	ce of t	food, drink
	Sta	te/territory	Postcode							
	NOTE	: Other addresse	es may be valid for service.							
3.7		he applicant e ces for the Sto	engaged a company to provide store management ore?							
	□ Y	es	□ No Go to item B.8.							
	-	•	following details:							
	Nam	e of the servic	es provider							
	NOT	E: This should be	e the legal name of the entity (eg ABC pty ltd)							
	Cont	act details								
	Phone	e number								
	Email	address								
		address re is one)								
3.8	resid		ficant source of food, drink and Grocery Items for ote Aboriginal and Torres Strait Islander Communit		et with		rovide	a separate		
		: 'Remote Aboria 4 of the Code.	ginal and Torres Strait Islander Community' is defined on	(a) Sel	lect all t	hat apply.				
	□ Y		□ No	Indicativ size		t is the Store's kly turnover?		at is the Store's ductive floor 1?	pop	v large is the ulation that the e services?
	If yes	, provide the	following details:	Basic		< \$35,000		< 250 m ²		< 200 people
	1	Name of the	Community the Store services	Small		\$35,000 - \$85,000		250 – 500 m ²		200 – 500 people
		To what exte	nt is the Store a significant source of food, drink	Medium		\$80-000 - \$150,000		500 – 750 m ²		500 – 1000 people
		and grocery i	tems to that Community?	Large		> \$150,000		> 750 m ²		> 1000 people
				NO by	TE: Store	e size is self-dete nse to (a) above.	rmined	ONE of the opt		

	following questions relate to the Store's compliance with Minimum dards.
Abori Store	: A reference in this section to a 'Community' is a reference to the Remote ginal or Torres Strait Islander Community that the Store services (see B.8). If the services multiple Communities, the applicant should refer to all of those nunities in its responses.
GOV	PERNANCE STANDARDS
В.10	Describe how the Community that the Store services can provide input into how the Store operates.
	NOTE: For example, is the Store governed by a board consisting of members from the Community?
	☐ The Community cannot provide input into how the Store functions.
	Tick this box to indicate that the Store does \underline{not} comply with the relevant Minimum Standard.
OPE	RATIONS STANDARDS
В.11	Are prices of products sold at the Store usually clearly and accurately displayed?
	☐ Yes ☐ No
	Selecting 'No' will indicate that the Store does <u>not</u> comply with the relevant Minimum Standard.
	If yes , provide at least 2 photos showing how prices of products sold a the Store are usually displayed.
B.12	Describe how the opening and closing hours of the Store are usually displayed.
	☐ The Store does not clearly display opening and closing hours.
	Tick this box to indicate that the Store does <u>not</u> comply with the relevant Minimum Standard.

B.13		ribe how the Cor ore closures, inc	-			s is usually	notified
		The Store does closures in adva		he Comm	unity of a	nticipated	Stores
		Tick this box to ind Minimum Standar		e Store do	es <u>not</u> comp	ly with the r	elevant
B.14		s the Store offer omers?	in-store info	ormal cre	dit arrange	ements to	any of its
	other inforr	: In-store informal similar credit arrar mal credit arrangen	ngements wit nent for the p	h custome	rs. Centrepa		
		res ting 'Yes' will indico ant Minimum Stand		tore does <u>i</u>	not comply (with the	
B.15	If the	e Store is Registe ay the NIAA Cod	red under t				
	□ Y	⁄es	□ No				
		ting 'No' will indica mum Standard.	te that the Si	ore does <u>n</u>	<u>ot</u> comply v	vith the relev	vant
B.16		e Store complian , policies and pro				nd/or Terr	itory
		Yes					
		The Store is not Territory laws, p	-				nd/or
		Tick this box to ind Minimum Standar		e Store do	es <u>not</u> comp	ly with the r	elevant



B.20 How many varieties of fresh fruit and vegetables of high quality are available at the Store at any given time?

HEALTH STANDARDS

	Store	•	and Drinks only promoted or discounted at the scount is reasonably necessary to reduce was r drink?		apple	es and red a	ole, cucumber and broccoli (2 varieties of fresh vegetables), greer pples (2 varieties of fresh fruit). Fresh fruit does not include fruit and vegetables.
		⁄es	□ No		Ansv	ver this que	stion by writing a number in each box below.
			ate that the Store does <u>not</u> comply with the relevant		(a)	At least	varieties of fresh fruit of high quality are
	Minir	num Standard.				available	at the Store at any given time.
	D	ملغ من مسم ما در مانس	Charallah salah. Fasad and Drialis (nat		(b)	At least	varieties of fresh vegetables of high quality are
			e Store Unhealthy Food and Drinks (not at Meals) are usually displayed and accessed	ру		available	at the Store at any given time.
		omers, including ic areas.	whether they are near the counter or high		of its		provide the number of varieties specified in the Code for a store em B.9), the Store does not comply with the relevant Minimum
			lowing options that reflect where Unhealthy usually displayed:	R 2			age of Ready-to eat Meals on display at the Store are
		at an area that	is <u>not</u> a high traffic area –			ally Health	
		Please describe	:				%
					If les	s than 50% t	the Store does <u>not</u> comply with the relevant Minimum Standard.
				В.2		-	age of refrigerated drinks on display at the Store are ar products?
							%
					If les	s than 50% t	the Store does <u>not</u> comply with the relevant Minimum Standard.
			ne options below may indicate that the Store does <u>relevant Minimum Standard.</u>	<u>B.2</u>	3 Is bo	ottled wate	er usually refrigerated and on display at the Store?
		at or near the o	counter where customers line up			Yes	□ No
		at the front end	d-of-aisle displays			cting 'No' wi mum Stando	Il indicate that the Store does <u>not</u> comply with the relevant ard.
		at the entrance	to the Store				
		near ATMs or p	public computers	REG	GISTR <i>A</i>	ATION STA	TUS
		at other high tr	affic areas –				
		Please describe	:	В.2			Registered under the Code, will the applicant be open nt with stakeholders regarding the Store's Registration?
						Yes	
						No	
						Tick this bo	ox to indicate that the Store will not comply with the relevant Standard.
				B.2	5 Wha	at type of F	Registration is the applicant seeking for this Store?
3.19	Are f	resh fruit and ve	egetable items continuously available, well-			Full Regis	stration
	pres	ented and clearl	y displayed in the Store?				e applicant is seeking Registration for additional Stores, fill out a of the attachment at www.niaa.gov.au/code-sign-up for each
		⁄es	□ No			Store	and provide the attachment(s) when lodging this Application
		ting 'No' will indico num Standard.	ate that the Store does <u>not</u> comply with the relevant			► Once	n. e all details have been provided, go to item B.29.
	-	-	st 2 photos showing how fresh fruit and vege	table			nal Registration
	item	s sold at the Sto	re are usually displayed.				o item B.26.



The following questions relate to the requirements for Conditional Registration under the Code Guidelines, including whether there is a reasonable pathway towards compliance with Non-Compliant Standards.

NOTE: Information about Conditional Registration is at [3.5] of the Code Guidelines.

3.26	Please list the all the Non-Compliant Standards identified in B.8- B.24
3.27	Is there a reasonable pathway for the applicant to comply with the relevant Non-Compliant Standards at the Store?
	☐ Yes
	□ No
3.28	Are there any significant barriers preventing the applicant from complying with the Non-Compliant Standards?
	□ No
	☐ Yes
	If yes, provide details below.
	By when does the applicant reasonably expect that the Store will become compliant with the Non-Compliant Standards?
	/ /

CONFLICTS OF INTEREST

lf yes, provide de	etails.			

B.29 To the best of its knowledge, and after due inquiry, is the applicant

This is the end of Part B.

If details have been provided for all relevant items in the Part, go to:

- Part C if you are applying to be a Scheme Participant, or for a Store to be a Scheme Registered Store (including a Store included in this Part B of the Application Form)
- Part D if you are not applying to be a Scheme Participant, or for a Store to be a Scheme Registered Store.

NOTE: Code Participation is a pre-condition to Scheme Participation.



Application Form

for the NATIONAL CODE OF PRACTICE FOR REMOTE STORE OPERATIONS and LOW-COST ESSENTIALS SUBSIDY SCHEME

PART C APPLYING FOR SCHEME REGISTRATION

Fill out this part of the form if applying for the Scheme.

By completing and lodging this Part C of the Application Form, you agree that:

- you have read and understood the Scheme Guidelines and the Low-Cost Essentials Subsidy Scheme Rules 2025 (Scheme Rules), and
- NIAA may register each Store described in Part C for the Scheme in accordance with the Scheme Guidelines.

Words and expressions in Part C have the same meanings as in the Scheme Guidelines and Scheme Rules.

Do not fill out this Part C unless applying to become a Scheme participant and/or Register a Store for the Scheme.

The applicant must satisfy the following Enrolment Requirements to be enrolled as a Code Participant: the applicant must be a legal person (a) See item A.4. NOTE: A Store Owner does not include a person operating the Store as a store (b) the applicant must be the Store Owner of at least one Remote management services provider, or who is otherwise engaged by another person to Community Store operate the Store the applicant must have an ABN or ARBN for each Store included in See item C.8. (c) this Application Form the applicant must not have a record of non-compliance with any See item C.2. existing grant funding agreements, or other agreements, entered into by the applicant with NIAA (if applicable) be suitable to be enrolled in the Scheme, and See items C.3 - C.5. NOTE: It is an Eligibility Requirement that the applicant enters into Credit Terms with enter into Credit Terms with Outback Stores for the purposes of the Outback Stores for the purposes of the Scheme. Information about Credit Terms are at

[3.4] of the Scheme Guidelines.

ABOUT THE APPLICANT

Scheme.

Provide the following details of the applicant relevant to the Eligibility Requirements.

NOTE: The Eligibility Requirements are set out at [3.1] of the Code Guidelines.

C.1	Is the applicant enrolled as a Scheme Participant at the time of lodging this Application Form?	□ Y	es Go to item	□ No n C.6.
C.2	Has the applicant previously received a grant from, or entered into an agreement with, NIAA?	□ Y	'es	□ No
		If yes	, what wa	as the applicant's provider reference number(s)? (if known)
			1	
			2	

If more space is required, or the applicant has more than 2 provider reference numbers, provide a separate page with the details.



The following questions go to whether the applicant is suitable to be enrolled for the Scheme (Eligibility Requirement E in the Scheme Guidelines) and the Evaluation Criteria used by NIAA to make that assessment.

C.3	Has	the applicant or any of its key management personnel:	NOTE: A business's key management personnel are the people with authority and responsibility for planning, directing and controlling the activities of a business, directly or indirectly, including any director (whether executive or otherwise) of that business.
	(a)	been convicted or found guilty of robbery, theft, fraud, or a similar offence involving deception?	☐ Yes ☐ No If yes, provide details
	(b)	been convicted or found guilty of a serious criminal offence the maximum penalty for which is or is more than 12 months' imprisonment?	☐ Yes ☐ No If yes, provide details
	(c)	had a civil penalty imposed for breach of an applicable law?	☐ Yes ☐ No If yes, provide details
	(d)	been investigated, or are any of them currently being investigated, by a Commonwealth, State or Territory government agency for a breach of an applicable law?	☐ Yes ☐ No If yes, provide details
C.4	capa	firm that the applicant has the financial and technical abilities to enable it to participate in the Scheme and orm its obligations under the Scheme Rules.	□ Yes □ No
C.5	it is	applicant agrees that, on receiving notice from NIAA that enrolled as a Scheme Participant and for as long as the icant is enrolled as a Scheme Participant, it will perform its gations under the Scheme Rules in respect of each Store it	☐ Yes ☐ No ► Go to item C.6.

By lodging this Application Form, the applicant acknowledges that it will only be enrolled as a Scheme Participant, and its Store(s) will only be Registered for the Scheme, once it has entered into Credit Terms with Outback Stores in accordance with the Scheme Guidelines.



owns that is registered as a Scheme Registered Store.

STORES TO BE REGISTERED FOR THE SCHEME

This section of the Application Form is also available as a separate attachment at www.niaa.gov.au/code-sign-up. If the applicant is seeking Scheme Registration for more than 1 Store, fill out and provide a separate attachment for each Store when lodging this Application Form.

Provide details of each Store the applicant has, and that the applicant is seeking Scheme Registration for.

Name of the Store		C.10 Is to App
The Store's physica	al address	
		C.11 Has
State	Postcode	in t NOT com
The Store's ABN:		
NOTE: The ABN can	also be the ABN for another Store.	By I
The Store's contac	t details:	Stoi
_	contact details are the same as those provided at box and go to item C.10.	C.12 Wh
Phone number		
Web address (if there is one)		
Physical address		
State	Postcode	
Email address for s	service of notices and other communications from	
NOTE: Other addresse	es may be valid for service.	
Postal address for NIAA	service of notices and other communications from	
State	Postcode	

C.10		e Store I lication I	Registered under the Code at the time of loo Form?	dging the
		Yes		
		► Go	o to item C.12.	
		No		
		► Go	to item C.11.	
C.11			licant applied for the Store to be Registered cation Form?	under the Code
			plicant can apply for a Store to be Registered under rt B of this Application Form in respect of that Stor	
		Yes		
		No		
	not b		is Application Form, the applicant acknowledges i red for the Scheme if NIAA does not also decide t Code.	
	•	Go to iter	m C.13.	
C.12		en did th	ne applicant last lodge a Statement of Compl ?	iance in respect
		Date	/ /	
		Not ap	plicable – Select ONE of the following.	
		-	plicant has not lodged a Statement of Comp t of the Store because:	liance in
		☐ th	ne Store has been Registered for less than 12	2 months
		□ of	ther:	
	•	Go to it	tem C.13.	



CON	FLICTS OF INTERES	Т
C 12	To the best of its kr	nowledge, and after due inquiry, is the applicant
	aware of any busin	ess or other dealings or relationships it is engaged in
	that may be consid	ered an actual, perceived or potential conflict of to its enrolment as a Scheme Participant or the
	registration of any	Store included in this Application Form as a Scheme
	Registered Store?	
	☐ Yes	□ No
	If yes, provide deta	ils.
This	is the end of Part C.	
f de	tails have been prov	ided for all relevant items in the Part, got to Part D.



Application Form

for the NATIONAL CODE OF PRACTICE FOR REMOTE STORE OPERATIONS and LOW-COST ESSENTIALS SUBSIDY SCHEME

PART D EXECUTION

Fill out this part of the form before lodging this application.

This Part of the Application Form requires the applicant make a number of statements and representations to the NIAA. You should make sure you understand these statements before lodging this Application Form.

NOTE: If you have any questions about this Part, you can ask the NIAA about the Application Form by sending a written enquiry to remotefoodsecurity@niaa.gov.au.

D.1 The applicant declares that all of the information about it in this form is accurate and complete.

NOTE: Providing false or misleading information to the NIAA can be a serious offence.

D.2 The applicant agrees to tell the NIAA as soon as practicable if any of the information in this application changes.

NOTE: This includes if the identity of the people or organisations that Control the applicant changes. See Code Guidelines and Scheme Guidelines at [2.10].

- D.3 The applicant consents to the NIAA and the Commonwealth using and disclosing confidential or personal information about it for the purposes of:
 - (a) considering this application, and
 - (b) performing its functions in relation to the administration of the Code and Scheme.
- D.4 The applicant agrees that, without limiting any other power of the NIAA, the NIAA may disclose information collected in (or in connection with) this application to, or collect information relevant to this application from, regulatory bodies or other State and Commonwealth departments and agencies, consumer groups, community or welfare organisations, or law enforcement agencies:
 - (a) to assess this application
 - (b) to administer, evaluate and monitor the operation of the Code and the Scheme (as applicable) in accordance with the Code Guidelines, Code Rules, Scheme Guidelines and Scheme Rules
 - (c) on request from regulatory bodies or other local, State, Territory or Commonwealth departments and agencies or
 - (d) otherwise as set out in [2.14] of the Code Guidelines and Scheme Guidelines.
- **D.5** By lodging this application for approval, **the applicant agrees** that that the Code Guidelines and Scheme Guidelines do not create any rights, express or implied, for the applicant except for confidentiality rights and rights about complaints as specified in the Code Guidelines and Scheme Guidelines.

NOTE: See [2.5] of the Code Guidelines and Scheme Guidelines for instructions on who needs to sign this form.

EXECUTED BY

Signatory 1	Signatory 2 (if relevant)
Signature	Signature
Print name	Print name
Position/title	Position/title
Director ID (if relevant)	Director ID (if relevant)

By my signature I warrant that I am authorised to bind the applicant. $\label{eq:loss} % \begin{center} \begin$

By my signature I warrant that I am authorised to bind the applicant.