





# 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:

- (a) 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 <a href="www.niaa.gov.au/code-sign-up">www.niaa.gov.au/code-sign-up</a>. 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 <a href="www.niaa.gov.au/code-sign-up">www.niaa.gov.au/code-sign-up</a>. 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:

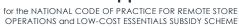
- (a) Monash University and / or the Office of the Registrar of Indigenous Corporations so they can contact Code Participants to assist Code Participants to comply with the Code
- (b) an organisation engaged by the NIAA to check how well the Code works and if Code Participants are following the Code
- (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.

| <b>A.1</b> | 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<br>Islander) Act 2006        | porations (Aboriginal and Torres Strait                   |
|            |                                  |  | Indigenous   |   |
|            |                                  |  | Corporation<br>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<br>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 convice  |  |   |
|            | NOTE: Other addresses ma         |  |  |   |
|            | Postal address for servi<br>NIAA | ce of notices and other communications from  | ABN  |   |
|            |                                  |  | Incorporation                                      |   |
|            |                                  |  | number (or<br>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. |  |
| <b>4.8</b> | 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 |
|--------------|---------|------------|---|
| For partners | wno are | individual | S |

|   | 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<br>(see item A.4) |  |  |
| ACN<br>(if applicable)           |  |  |
| ABN                              |  |  |
| ARBN<br>(if applicable)          |  |  |
|                                  |  |  |

| Name                    |  |  |
|-------------------------|--|--|
| Type of entity          |  |  |
| (see item A.4)          |  |  |
| ACN<br>(if applicable)  |  |  |
| ABN                     |  |  |
| ARBN<br>(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<br>(if applicable)  |  |
|   | ABN                     |  |
|   | ARBN<br>(if applicable) |  |
|   |                         |  |
| 2 | Name                    |  |
|   | Type of entity          |  |
|   | (see item A.4)          |  |
|   | ACN<br>(if applicable)  |  |
|   | ABN                     |  |
|   | ARBN<br>(if applicable) |  |
|   |                         |  |
| 3 | Name                    |  |
|   | Type of entity          |  |
|   | (see item A.4)          |  |
|   | ACN<br>(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 | The applicant must satisfy the following requirements to be enrolled as a Code Participant:   |  |  |  |  |  |  |  |  |  |
|-----|---|--|--|--|--|--|--|--|--|--|
| (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 ( <b>Store</b> ) 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 |
|--|---------|-----|-----------|---------|--------|-----------|
|--|---------|-----|-----------|---------|--------|-----------|

|     | 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 <a href="www.niaa.gov.au/code-sign-up">www.niaa.gov.au/code-sign-up</a>. 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 Th         | e Store's ABN:  |
|-----|------------------------------|-----|---------------|---|
|     |                              |     | 1             | IOTE: The ABN can also be the ABN for another Store.  |
| B.4 | The Store's physical address | В.  | . <b>6</b> Th | e 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. |
|     |                              |     | ŀ             | Yey contact name  |
|     | State/territory Posto        | de  | F             | Phone number  |
|     |                              |     | ١             | Veb address   |
|     |                              |     | - (           | if there is one)  |



|     | NIA             |                                     | ervice of notices and other communications from           |     |                   | tails of<br>evant) | the other Com                            | muni        | ties the Store s                | ervice  | es (if                       |
|-----|-----------------|-------------------------------------|---|-----|-------------------|--------------------|--|-------------|---------------------------------|---------|------------------------------|
|     | NOT             | E: Other addresse                   | es may be valid for service.                              |     |                   |                    |  |             |                                 |         |                              |
|     | Post            |                                     | service of notices and other communications from          |     |                   |                    |  |             |                                 |         |                              |
|     |                 |                                     |   |     |                   |                    |  |             |                                 |         |                              |
|     |                 |                                     |   |     |                   |                    | xtent is the Sto<br>ery Items to the     |             | significant sour<br>ommunities? | ce of t | food, drink                  |
|     | Sta             | ate/territory                       | Postcode  |     |                   |                    |  |             |                                 |         |                              |
|     | NOT             | E: Other addresse                   | es may be valid for service.                              |     |                   |                    |  |             |                                 |         |                              |
| 3.7 |                 | the applicant e<br>ices for the Sto | engaged a company to provide store management ore?        |     |                   |                    |  |             |                                 |         |                              |
|     |                 | Yes                                 | □ No Go to item B.8.                                      |     |                   |                    |  |             |                                 |         |                              |
|     | -               | •                                   | following details:  |     |                   |                    |  |             |                                 |         |                              |
|     | ivan            | ne of the servic                    | es provider   |     |                   |                    |  |             |                                 |         |                              |
|     | NO <sup>1</sup> | TE: This should be                  | e the legal name of the entity (eg ABC pty ltd)           |     |                   |                    |  |             |                                 |         |                              |
|     | Con             | tact details                        |   |     |                   |                    |  |             |                                 |         |                              |
|     | Phor            | ne number                           |   |     |                   |                    |  |             |                                 |         |                              |
|     | Ema             | l address                           |   |     |                   |                    |  |             |                                 |         |                              |
|     |                 | address<br>ere is one)              |   |     |                   |                    |  |             |                                 |         |                              |
| ı Q | Ic th           | a Stora a signif                    | icant source of food, drink and Grocery Items for         |     | If m              | ore spa            | ce is required, p                        | rovide      | a separate                      |         |                              |
|     | resi            |                                     | ote Aboriginal and Torres Strait Islander Communit        |     | shed<br>What is t | et with            |  |             |                                 |         |                              |
|     |                 |                                     | ginal and Torres Strait Islander Community' is defined on | D.5 |                   |                    | hat apply.                               |             |                                 |         |                              |
|     | page            | 4 of the Code.<br>Yes               | □ No  |     | Indicative        |                    | t is the Store's                         |             | at is the Store's               |         | _                            |
|     |                 |                                     |   |     | size              |                    | kly turnover?                            | pro<br>area | ductive floor<br>1?             |         | ulation that the e services? |
|     | If ye           | •                                   | following details:  |     | Basic             |                    | < \$35,000                               |             | < 250 m <sup>2</sup>            |         | < 200 people                 |
|     | 1               | Name of the                         | Community the Store services                              |     | Small             |                    | \$35,000 -<br>\$80,000                   |             | 250 – 500 m <sup>2</sup>        |         | 200 – 500<br>people          |
|     |                 |                                     | nt is the Store a significant source of food, drink       |     | Medium            |                    | \$80-000 -<br>\$150,000                  |             | 500 – 750 m²                    |         | 500 – 1000<br>people         |
|     |                 | and grocery i                       | tems to that Community?                                   |     | Large             |                    | > \$150,000                              |             | > 750 m <sup>2</sup>            |         | > 1000 people                |
|     |                 |                                     |   |     | NOT by it         | ΓΕ: Store          | e size is self-dete<br>nse to (a) above. | rmine       | ONE of the opt                  |         |                              |
|     |                 |                                     |   |     | _                 | _3.00              |  |             |                                 |         |                              |

|                | following questions relate to the Store's compliance with Minimum dards.   |
|----------------|--|
| Abori<br>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<br>Minimum Standard.  |
|                | If <b>yes</b> , provide at <b>least 2 photos</b> 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<br>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<br>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<br>inforr | : In-store informal<br>similar credit arrar<br>mal credit arrangen | ngements wit<br>nent for the p | h custome          | rs. Centrepa       |                |            |
|      |                 | res<br>ting 'Yes' will indico<br>ant Minimum Stand                 |                                | tore does <u>i</u> | not comply (       | with the       |            |
| B.15 | If the          | e Store is Registe<br>ay the NIAA Cod                              | red under t                    |                    |                    |                |            |
|      | □ Y             | ⁄es  | □ No                           |                    |                    |                |            |
|      |                 | ting 'No' will indica<br>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<br>, policies and pro                             |                                |                    |                    | nd/or Terr     | itory      |
|      |                 | Yes  |                                |                    |                    |                |            |
|      |                 | The Store is not<br>Territory laws, p                              | -                              |                    |                    |                | nd/or      |
|      |                 | Tick this box to ind<br>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 | -                                   | d and Drinks only promoted or discounted<br>discount is reasonably necessary to reduce<br>or drink? |                | apple          | es and red a                | pples (2 | umber and broccoli (2 varieties of fresh vegetables), green<br>2 varieties of fresh fruit). Fresh fruit does not include<br>Id vegetables. |
|-------|-------|-------------------------------------|---|----------------|----------------|-----------------------------|----------|--|
|       |       | ⁄es                                 | □ No  |                | Ansv           | ver this que                | stion by | y writing a number in each box below.  |
|       | Selec | ting 'No' will ind                  | icate that the Store does not comply with the rele  | evant          | (a)            | At least                    |          | varieties of fresh fruit of high quality are   |
|       | Minir | num Standard.                       |   |                |                | available                   | at the   | e Store at any given time.   |
| 1 1 2 | Dasc  | riha whara in                       | the Store Unhealthy Food and Drinks (not  |                | (b)            | At least                    |          | varieties of fresh vegetables of high quality are  |
|       |       |                                     | -eat Meals) are usually displayed and acces   | ssed by        |                | available                   | at the   | Store at any given time.   |
|       |       | omers, includi<br>ic areas.         | ng whether they are near the counter or hi  | gh             | ,              |                             | ,        | e the number of varieties specified in the Code for a store<br>, the Store does not comply with the relevant Minimum                       |
|       |       |                                     | following options that reflect where Unhease usually displayed:                                     | Ithy           | Stan           | dard.                       |          |  |
|       |       |                                     | at is <u>not</u> a high traffic area –  | B.2            |                | at percenta<br>ally Health  | -        | Ready-to eat Meals on display at the Store are ls?   |
|       |       | Please descri                       | be:   |                |                |                             | %        |  |
|       |       |                                     |   |                | If les         | s than 50%                  | the Stoi | re does <u>not</u> comply with the relevant Minimum Standard.  |
|       |       |                                     |   | в.2            |                | at percenta<br>ally no-sug  | -        | refrigerated drinks on display at the Store are ducts?   |
|       |       |                                     |   |                |                |                             | %        |  |
|       |       |                                     |   |                | If les         | s than 50%                  | the Stoi | re does <u>not</u> comply with the relevant Minimum Standard.  |
|       |       |                                     | the options <b>below</b> may indicate that the Store derelevant Minimum Standard.                   | oes <u>not</u> | <b>3</b> Is bo | ottled wate                 | er usua  | ally refrigerated and on display at the Store?   |
|       |       | at or near the                      | e counter where customers line up   |                |                | Yes                         |          | □ No   |
|       |       | at the front e                      | nd-of-aisle displays  |                |                | cting 'No' wi<br>mum Stando |          | ate that the Store does <u>not</u> comply with the relevant  |
|       |       | at the entran                       | ce to the Store   |                |                |                             |          |  |
|       |       | near ATMs or                        | public computers  | REG            | GISTR <i>A</i> | ATION STA                   | TUS      |  |
|       |       | at other high                       | traffic areas –   |                |                |                             |          |  |
|       |       | Please descri                       | be:   | B.2            |                |                             |          | ered under the Code, will the applicant be open<br>n stakeholders regarding the Store's Registration?                                      |
|       |       |                                     |   |                |                | Yes                         |          |  |
|       |       |                                     |   |                |                | No                          |          |  |
|       |       |                                     |   |                |                | Tick this bo                |          | dicate that the Store will not comply with the relevant rd.  |
|       |       |                                     |   | B.2            | 5 Wha          | at type of F                | Registr  | ation is the applicant seeking for this Store?   |
| 3.19  | Are f | fresh fruit and                     | vegetable items continuously available, we  |                |                | Full Regis                  | stratio  | n  |
|       |       |                                     | orly displayed in the Store?  |                |                | ► If the                    | e applic | ant is seeking Registration for additional Stores, fill out a  |
|       |       | ⁄es                                 | □ No  |                |                | Store                       | e and pi | attachment at www.niaa.gov.au/code-sign-up for each rovide the attachment(s) when lodging this Application                                 |
|       |       | ting 'No' will ind<br>num Standard. | icate that the Store does <u>not</u> comply with the rele   | evant          |                | Form<br>▶ Once              |          | tails have been provided, go to item B.29.   |
|       |       |                                     | east 2 photos showing how fresh fruit and   | vegetable      |                |                             |          | gistration   |
|       | item  | s sold at the St                    | tore are usually displayed.   |                | J              |                             | o item L |  |
|       |       |                                     |   |                |                |                             |          |  |



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.

| Please list | the all the Non-0                       | Compliant | Standard    | s identified i | n B.8- B.24  |
|-------------|---|-----------|-------------|----------------|--------------|
|             |   |           |             |                |              |
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|             |   |           |             |                |              |
|             | a reasonable pa                         |           |             |                | oly with the |
| _           |   | Stariuaru | s at the st | ore:           |              |
| _           |   |           |             |                |              |
| □ N         |   |           |             |                |              |
|             | re any significant<br>ing with the Non- |           |             |                | nt from      |
| □ N         | 0                                       |           |             |                |              |
| ☐ Ye        | es                                      |           |             |                |              |
| f yes, pro  | vide details belo                       | w.        |             |                |              |
|             |   |           |             |                |              |
|             | does the applicar<br>ompliant with th   |           |             |                | ore will     |
|             | /                                       |           | /           |                |              |

CONFLICTS OF INTEREST

| □ Yes           |            | ] No |  |  |
|-----------------|------------|------|--|--|
| If yes, provide | e details. |      |  |  |
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**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<br>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.

#### For the following Question C.3, please NOTE:

**Use of information:** The information provided by applicants relates to assessment against the Evaluation Criteria in 3.3 of the Scheme Guidelines. The information provided is not used for any other purposes.

Spent Convictions: For the purposes of this question, a person should not disclose a conviction regarded as spent (per section 85ZM(2) of the Crimes Act 1914 (Cth); where the person was granted a free and absolute pardon because the person was wrongly convicted of the offence; or where the person's conviction for the offence has been quashed).

Under section 85ZM(2) of the Crimes Act 1914, a person's conviction of an offence is spent if:

- (a) the person has been granted a pardon for a reason other than that the person was wrongly convicted of the offence; or
- (b) the person was not sentenced to imprisonment for the offence or was not sentenced to imprisonment for the offence for more than 30 months, and the waiting period for the offence has ended.

Under section 85ZL of the Crimes Act 1914, the waiting period is:

- (a) if the person convicted of the offence was dealt with as a minor in relation to the conviction—the period of 5 years beginning on the day on which the person was convicted of the offence; or
- (b) in any other case—the period of 10 years beginning on the day on which the person was convicted of the offence.

**Key Management Personnel:** 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, of that business. This would also include applicants that undertake these activities.

| C.3 |      | se answer the following regarding the applicant's  |      |                            |    |
|-----|------|--|------|----------------------------|----|
|     |      | ibility:   |      |                            |    |
|     | (a)  | Has the applicant, at the time of application, been convicted or found guilty of robbery, theft, fraud, or a   |      | Yes                        | No |
|     |      | similar offence involving deception?   | If y | es, provide details        |    |
|     |      |  |      |                            |    |
|     | (b)  | Has any of the applicant's key management personnel<br>been convicted or found guilty of a serious criminal<br>offence the maximum penalty for which is or is more |      | Yes<br>es, provide details | No |
|     |      | than 12 months' imprisonment?  |      |                            |    |
|     | (c)  | Is the applicant or any of its key management personnel currently being investigated, by a Commonwealth, State or Territory government agency for a breach of an   |      | Yes<br>es, provide details | No |
|     |      | applicable law?  |      |                            |    |
| C.4 | capa | firm that the applicant has the financial and technical bilities to enable it to participate in the Scheme and form its obligations under the Scheme Rules.        |      | Yes                        | No |
| C.5 |      | applicant agrees that, on receiving notice from NIAA that  |      | Yes                        | No |
|     |      | enrolled as a Scheme Participant and for as long as the<br>icant is enrolled as a Scheme Participant, it will perform its  | •    | 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.



obligations under the Scheme Rules in respect of each Store it 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 <a href="www.niaa.gov.au/code-sign-up">www.niaa.gov.au/code-sign-up</a>. 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                |  | <b>C.10</b> Is to App |
|----------------------------------|--|-----------------------|
|                                  |  |                       |
| The Store's physica              | al address   |                       |
|                                  |  | <b>C.11</b> Has       |
| State                            | Postcode   | in t<br>NOT<br>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<br>(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<br>lication I | Registered under the Code at the time of lod<br>Form?   | ging 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<br>rt B of this Application Form in respect of that Store    |                 |
|      |             | Yes                     |   |                 |
|      |             | No                      |   |                 |
|      | not b       |                         | is Application Form, the applicant acknowledges t<br>tred for the Scheme if NIAA does not also decide to<br>Code. |                 |
|      | <b>&gt;</b> | Go to iter              | m C.13.   |                 |
| C.12 |             | en did th               | e applicant last lodge a Statement of Compli<br>?   | ance in respect |
|      |             | Date                    | / /   |                 |
|      |             | Not ap                  | plicable – Select ONE of the following.   |                 |
|      |             | -                       | plicant has not lodged a Statement of Comp<br>t of the Store because:   | liance in       |
|      |             | ☐ th                    | ne Store has been Registered for less than 12   | 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.   |
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| 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.