



REYKJAVÍK PUBLIC HEALTH AUTHORITY
Borgartún 12, 105 Reykjavík - Telephone 411 1111
www.reykjavik.is/heilbrigdiseftirlit - heilbrigdiseftirlit@reykjavik.is

Application for license to operate

- New license
 New registration
 New owner
 Renewal of license
 Transfer to new facilities
 Modification of facilities
 Change of business
 Temporary license

Company name: Titan A 550921-1380 Address: Vidachöfði 3
Name of the company as listed in the telephone directory This address where the operation is located at present or will be

Postcode: 110 Telephone: 454-1700 e-mail address: info@titani.is Website: TitanA.is

Operator of the company: Saulė Kacpavičienė ID no.: 220767-2649
Legal entity or individual

Domicile of operator: Garðabær 210 Lyngs ídal Postcode: 210
According to Registers Iceland

Type of operation and production: Bilaverkstæði ásamt smur- og
hjólbardakjónustu see also reverse.

Operations will start on: _____ Expected end of operations: _____

The operator of the company undertakes the responsibility to see to that activity and operation of the company is conducted in accordance with current laws on hygiene and public health, pollution control and food safety as well as with other laws and regulations covering the operation.

Any planned substantial modification of facilities, production and operation must be made in consultation with the Reykjavík Public Health Authority.

Vidachöfði 110 RUK
Place and date

[Signature]
Signature of operator

Owner of property: _____

Property ID. number: 550921-1380
Record also the property space number where the operation takes place, if there are multiple space numbers within the property
RUK 2023 08 02
Place and date

[Signature]
Signature of owner of property

According to the law on hygiene and pollution protection, No. 7/1998, all claims relating to the issuance of a license to operate, inspection control and cost of any action taken by the public health committees are secured by statutory lien in the relevant property, cf. art. 12, 25 and 27 of said law.

Application received: _____

3. ágúst 2023, JÓA

Public health board's decision: _____

License no.: _____

Fee rate cat. 4

Cat. of operation: _____

50.20.08 smurstöðuvör
50.20.01 Bifreiða- og vélvæðing
50.20.09 Hjólbardakjónustu

Approved housing _____

Internal control: _____

Enter additional information on back page >

Additional information

Describe in more detail, as is applicable; any emissions or pollutants generated into the environment, classification and disposal of waste produced and hazardous waste, disposal into sewage system. Explain pollution prevention into sewage (oil- and fat collector), define and describe ventilation, countermeasures concerning noise, safety issues etc. Give an account of the company's internal control system, see details below regarding food business operation and be aware that many of the above issues also apply to food businesses.

Food business operation (all applicable items must be filled in):

<p>Type of operation</p> <ul style="list-style-type: none"> <input type="checkbox"/> Only food contact materials <input type="checkbox"/> Non-prepacked food not prepared or treated at the location <input type="checkbox"/> Prepacked food only (non-prepacked food not prepared, treated or processed/unprocessed products not prepared or treated) <input type="checkbox"/> Low-risk foods (such as vegetables/fruits) prepared, treated or cooked <input type="checkbox"/> High-risk foods (such as dairy products, fish, meat, poultry) prepared, treated or cooked 	<p>Types of equipment and tools</p> <ul style="list-style-type: none"> <input type="checkbox"/> Freestanding handwash basin with hands free faucet in each processing area and in the service counter area. <input type="checkbox"/> Kitchen food washing sink (number of:) <input type="checkbox"/> Sink for washing tools and utensils <input type="checkbox"/> Sink for rinsing tableware (e.g. glasses, forks, knife, spoons, plates, bowls) and dishwasher <input type="checkbox"/> Solely disposable tableware <input type="checkbox"/> Non-disposable tableware
<p>Equipment</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cooking equipment <input type="checkbox"/> Kitchen fume hood and ventilation from it (mechanical) <input type="checkbox"/> Refrigerator(s) <input type="checkbox"/> Freezer(s) <input type="checkbox"/> Dishwasher <input type="checkbox"/> Other _____ 	<p>Personnel facilities</p> <ul style="list-style-type: none"> <input type="checkbox"/> Employee change room with lockers for overcoats and the personal belongings of employees <input type="checkbox"/> Employee toilet facilities <input type="checkbox"/> Coffee room with kitchen sink
<p>Explain the attached document _____</p>	
<p>Cleaning service facilities</p> <ul style="list-style-type: none"> <input type="checkbox"/> Enclosed ventilated cleaning service facilities with cleaning service sink <input type="checkbox"/> Special ventilated cleaning service facilities with cleaning service sink for kitchen 	<p>Food safety system (Internal control)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Simple internal control, Cat. 1 <input type="checkbox"/> Internal control, Cat. 2 <input type="checkbox"/> Internal control w/HACCP, Cat. 3