

Food Hygiene Rating Scheme Revisit Request Form

Notes for businesses

- As the food business operator of the establishment you have a right to request a re-visit for the purposes of re-rating. If you have taken action to rectify the non-compliances identified at the time of inspection.
- You can make a request for a re-visit following a planning statutory inspection by the local authority and you can make this at any time after the statutory inspection provided that you have made the required improvements.
- You must provide details of the improvements made with your request, including supporting evidence where appropriate.
- If the local authority considers that you have provided sufficient evidence that the required improvements have been made, the local authority will make an unannounced visit. This will take within three months of the request, note that this includes submission of this form and making the required payment.
- The local authority officer will give you a 'new' food hygiene rating based on the level of compliance that is found at the time of the re-visit – you should be aware that your rating could go up, down or remain the same.
- To make a request for a revisit, please use the form below and return it to the food safety officer from this local authority – contact details are provided below.

Please note: a charge of £175.00 will be made for all requests for revisits received. Payment can be made via debit/credit card. On receipt of your request, we will contact you to take payment. If you require an alternative method of payment, please ring 0121 303 9903 to discuss.

Food business operator/proprietor			
Business name			
Business addresses			
Business tel. no.		Business email	
Date of inspection		Food hygiene rating given	

Please describe the remedial action you have taken with reference to the issues identified in the inspection letter/report provided to you by your local authority with your score.

Compliance with food hygiene and safety procedures	
Compliance with structural requirements	
Confidence in Management/control procedures	

Please provide any other supplementary evidence (eg photographs, invoices, copies of relevant HACCP documentation etc.)

Signed					
Name in capitals					
Position		Contact Tel No:		Date	