

## FOOD HYGIENE RATING

# Food Hygiene Rating Scheme: Request for a re-visit

### 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.
- **We make a charge for this service of £180. The unannounced re-visit will normally be carried out within 6 weeks of the receipt of your request and payment of the fee. Details of how to pay are given overleaf. There is no limit on the number of requests you may make, but the fee will apply for each request.**
- You can make your request 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 we consider that you have provided sufficient evidence that the required improvements have been made, an unannounced, full inspection will take place.
- 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 your local authority – contact details are provided with the written notification of your food hygiene rating.

### Business details

Food business operator/proprietor

Business name

Business addresses

Business tel. number

Business email

### Inspection details

Date of inspection

Food hygiene rating given

### Action taken

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 (e.g. photographs, invoices, copies of relevant HACCP documentation etc.).

Signature

Name in capitals

Position

Date

## How to pay:

<b>Local Authority:</b>	<b>Cotswold District Council</b> Food Safety Team Trinity Road Cirencester GL7 1PX <a href="mailto:ERS@publicagroup.uk">ERS@publicagroup.uk</a>	<b>Forest of Dean District Council</b> Food Safety Team High Street Coleford GL16 8HG <a href="mailto:ERS@publicagroup.uk">ERS@publicagroup.uk</a>	<b>West Oxfordshire District Council</b> Food Safety Team Woodgreen Witney OX28 1NB <a href="mailto:ERS@publicagroup.uk">ERS@publicagroup.uk</a>
<b>By cheque to:</b>	Cotswold District Council	Forest of Dean District Council	West Oxfordshire District Council
<b>In person at:</b>	<ul style="list-style-type: none"> <li>• Trinity Road Cirencester GL7 1PX</li> <li>• Moreton Area Centre High Street Moreton-in-Marsh GL56 0AZ</li> </ul>	<ul style="list-style-type: none"> <li>• High Street Coleford GL16 8HG</li> </ul> <p>(Credit or debit card only. No cash)</p>	<ul style="list-style-type: none"> <li>• Town Centre Shop 3 Welch Way Witney OX28 6JH</li> </ul>
<b>By phone:</b>	01285 623000	01594 810000	01993 861000

### How you are paying:

- Cheque – state receipt number below if known.
- Cash - state receipt number below.
- Card - state receipt number below.

Receipt no: .....

(If paying by cash or card you must pay **before** returning your Revisit Request form so you can include the receipt number).

**FOR OFFICE USE ONLY : cost code : REG016 – R9308**

Please now return this form to your Local Authority – address as above.