

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-inspection for the purposes of re-rating if you have taken action to rectify the non-compliances identified at the time of inspection – see your inspection report left with you at the time of the inspection and/or letter sent afterwards.
- There is a non-refundable charge of **£225.00** (this is VAT exempt) payable in advance for this service. The re-inspection will be unannounced and carried out within **3 months** of receipt of payment. There is no limit on the number of requests you may make.
- You must provide details of the improvements made with your request, including supporting evidence where appropriate. Once you have provided sufficient information on the form below or attached, you will be contacted by telephone to make the 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-inspection - you should be aware that your rating could go up, down or remain the same.
- To make a request for a re-inspection, please use the form below and return it to; Environmental Health Service, Civic Offices, Gloucester Square, Woking, Surrey, GU21 6YL or environmentalhealth@woking.gov.uk

Business details

Food business operator/proprietor	<input type="text"/>		
Business name	<input type="text"/>		
Business addresses	<input type="text"/>		
Business tel. number	<input type="text"/>	Business email	<input type="text"/>

Inspection details

Date of inspection	<input type="text"/>	Food hygiene rating given	<input type="text"/>
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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	<input type="text"/>
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Compliance with structural requirements	<input type="text"/>
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Confidence in management/control procedures	<input type="text"/>
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Please provide any other supplementary evidence (e.g. photographs, invoices, copies of relevant HACCP documentation etc.).	<input type="text"/>
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Signature	<input type="text"/>
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Name in capitals	<input type="text"/>
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Position	<input type="text"/>	Date	<input type="text"/>
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