

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.
* You can make a request for a revisit at any time after the statutory inspection provided that you have made the required improvements. **There is a fee of £205 for a revisit**. 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.
* If the local authority considers that you have provided sufficient evidence that the required improvements have been made, and provided that a three month ‘stand still’ period has passed since the statutory inspection, the local authority will make an unannounced visit. This will take place within three months of the end of the three month ‘stand still’ period or within three months of the request if this made after the ‘stand still’ period (if you were only required to make permanent structural improvements or repairs or to upgrade equipment, the local authority can choose to carry out the requested re-visit sooner than this). Where the local authority charge for the re-visit, the stand-still period will not be applied and the re-visit will be carried out within three months of the receipt of your request and payment of the fee.
* 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:**

|  |  |
| --- | --- |
| **Online** | [West Oxfordshire District](https://forms.westoxon.gov.uk/eforms/ufsmain?formid=ORG_GENERIC_PAYMENT&C_PRM__ORG=WOD&ebz=1_1533306432388&ebd=0&ebz=1_1533306432388)  [Council - Online Payment](https://forms.westoxon.gov.uk/eforms/ufsmain?formid=ORG_GENERIC_PAYMENT&C_PRM__ORG=WOD&ebz=1_1533306432388&ebd=0&ebz=1_1533306432388) |
| **By phone:** | 01993 861000  Record the receipt number below  ……………………………………… |

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