

SECTION 8 - DUE DILIGENCE

DD/02: Customer feedback report - food safety

1 Details of person offering feedback						
Name/surname:						
Address/post code:						
E-mail address:				Tel. No:		
*Delete as appropriate	*Staff	*Customer	*Student	*Delegate	*Visitor	

2 Details of feedback						
Outlet/Unit:			Date:		Time:	
Product implicated:						
Product was:	Brought in from external supplier / Produced on-site					
Batch Number:			Use-by / Best-before:			
Nature of feedback:						

3 Action taken at unit-level	
Is there a need to remove product from general sale to prevent further re-occurrence?	Yes / No
Action taken to prevent a re-occurrence of this incident (if appropriate):	
Has department responsible for purchasing product been informed (where appropriate)	Yes / No
Is there need for further investigation?	Yes / No

4 Details of person recording feedback	
Name	
Signature:	
Post held:	

Version	Date of issue	Author	Endorsed by
V3	June 2019	Graham Day; Health & Safety Adviser	Graham Hakes; Senior Health & Safety Adviser