**Food and feed incident report form**

This form is to be completed and emailed to Food Standards Scotland at [incidents@fss.scot](mailto:incidents@fss.scot).

Tel: 07881 516 867

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| **1. Name and address of reporting officer. Please include address, telephone and email details:** | | | | |
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| **2. Date and time of initial notification:** | | | | |
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| **3. Where was the initial information received from? For example, local food/feed authority, FSS (feed), Public Health Scotland, business etc. Please include name, address and contact details:** | | | | |
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| **4. Method of information received (for example, telephone, email, letter or other:** | | | | |
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| **5. Brief description of incident:** | | | | |
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| **6. Contamination type. For example, microbiological, chemical or physical. If physical please advise type of injury this may cause:** | | | | |
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| **7. Breach in legislation? Please include legislation, maximum permitted levels etc.:** | | | | |
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| **8. During which stage was the incident likely to have occurred? For example, processing, packaging, handling, storage, distribution etc.:** | | | | |
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| **9. Product description:** | | | | |
| **a. Type of product:** | | | | |
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| **b. Product name:** | | | | |
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| **c. Product brand name:** | | | | |
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| **d. Batch code/s:** | | | | |
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| **e. Description of packaging:** | | | | |
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| **f. Pack size:** | | | | |
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| **g. Durability date/s or code/s:** | | | | |
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| **h. Country of origin:** | | | | |
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| **i. UK importer/distributor (please include contact details):** | | | | |
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| **j. Product manufacturer (please include contact details):** | | | | |
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| **k. Could other products produced in the establishment have been contaminated or affected?:** | | | | |
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| **l. Packer (please include contact details):** | | | | |
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| **10. Details of distribution (Please include when product or batch was placed on market, quantities involved, areas, export to EU and third countries):** | | | | |
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| **11. Has clinical Illness occurred** **or has animal health and welfare been compromised? Please provide details. For example, symptoms, type of illness, number of consumers affected, samples submitted, etc. and who has been contacted – HPS / CPHM etc.:** | | | | |
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| **12. How is the company (manufacturer/retailer /supplier) dealing with the incident and what steps are to be taken?:** | | | | |
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| **13. Assessment of hazard. Please tick as many as appropriate:** | | | | |
| **Local** | |  | **Manufacture** |  |
| **Regional** | |  | **Retail** |  |
| **National** | |  | **Catering** |  |
| **International** | |  | **Import / Export** |  |
| **15. Enforcement action, if applicable. For example, what samples have been taken, what notices have been served, has food and/or feed been seized etc. All lab reports, notices etc. are to be sent FSS Incidents as soon as possible:** | | | | |
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| **16. Is malicious or fraudulent activity suspected?:** | | | | |
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| **17. Has there been media interest? Please tick as appropriate:** | | | | |
| **Yes** | |  | **No** |  |
| ***If there has been a press release please send to FSS with this form*** | | | | |
| **18. Additional information (please attach additional pages if required):** | | | | |
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| **Signed by:** |  | | | |
| **Date:** |  | | | |
| **Job Title:** |  | | | |