

Immediately Inform the Location Manager or Supervisor of the Consumer Complaint

Purpose: This form is to be used to document calls and person-to-person conversations with customers who complain that they became sick after eating at or purchasing food from the Food Establishment. If the person is currently experiencing symptoms or the Food Establishment owner/operator/ manager suspects this complaint could be part of a suspected or confirmed outbreak, owner/operator/ should report this information to the Public Health Authority in their jurisdiction.

Customer Foodborne Illness Complaint Form

Food Establishment Name:

Address:

Name of person taking complaint:

Date complaint received: ____ / ____ / ____ (YYYY-MM-DD)

Did the staff person read the following statement to the complainant? ☐ Yes ☐ No

SUGGESTED COMMENTS AND QUESTIONS:

"Thank you for calling (contacting) us. We are sorry for any inconvenience or illness you may have suffered. We investigate all claims of illness brought to our attention and would like to ask you some questions about your experience. Would you be willing to take a few minutes to provide us with more information?" ☐ Yes ☐ No

What is your full name?

What is your relationship to the ill person?

Name of person complaining of illness (if not the caller):

Ill person's Cell Phone:

Ill person's Email/Other:

Ill person's Address:

How many people ate the meal or food (regardless of whether they are ill)?

How many people are ill?

When was the meal, food consumed? Date: ____ / ____ / ____ (YYYY-MM-DD) Time:

What did you (or the ill person) have to eat?

(ask specific questions, be sure to include beverages/ice)

When did people become ill? Date: ____ / ____ / ____ (YYYY-MM-DD) Time:

What symptoms are/were you (or the person you are reporting for) experiencing?

NOTE: If a person still has symptoms, recommend that they consider seeking medical attention and directly notify the Public Health Authority. **Do not give medical advice.**

SUGGESTED ENDING COMMENTS:

"Thank you for your call. We regret that you had an unpleasant food experience. We hope that you are doing well and will give us the opportunity to serve you again in the near future."

Customer comments:

Food Establishment Follow-Up Actions:

Was this complaint reported to the Regulatory/Public Health Authority? ☐ Yes ☐ No

If yes, the name of the organization and date sent:

Other follow-up actions: