



**QA - HEALTH & SAFETY
HACCP - Product Recall Form**

CODE: 11.02.022

EDITION: 1

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Hotel Name:		Date:	
Information received from:		Reference:	
The following food is subject to:	Yes	No	Area Of item Usage
Government Health Food Hazard Warning			
Trade Withdrawal			
Emergency Control Order			
Description of Food:			
Brand Name:			
Country of Origin:			
Importer / Distributor			
Code/Other reference or mark			
Pack Weight / Size			
Reason for Product Recall / Hazard Warning			
No further deliveries of this product are to be accepted until this notice is cancelled			
Action to be taken in respect of any stocks of the above product already on the premises			
Date of Item Recalled from Kitchens			
Name And Signature:			Date:

Monitored By:

Signature:

Date:

Verified By:

Signature:

Date: