NOTE: This form is to be used by Local Health Departments that do not have access to the Environmental Health Electronic Reporting System. Local Health Departments with access to the electronic reporting system may use this form for guidance, but information is to be entered electronically.

Completed By:                      Title:                      Agency:

A. Establishment Information

Establishment:                           Type of Operation(s):  ☐ Food Service  ☐ Retail  
                                            ☐ Mobile  ☐ Temporary  ☐ Other:________________________

Address:  

Date Complaint Received:  Date(s) Environmental Investigation Completed:  

Implicated Food(s):  

Food Samples Collected:  Y   N  From:  ☐ Consumer  ☐ Food Establishment  ☐ Food Manufacturer/Distributor  

Food Worker Questionnaire(s)  

Completed:  Y   N  Number Questionnaires Completed:  Number of Employees at Establishment:  

B. Recent Compliance History

☐ Most recent inspection report prior to the complaint attached.  Date of prior inspection:  

C. Risk Assessment of Suspect Food  (Required)

☐ HACCP based risk assessment of the suspect food(s) or process(es) attached. Include food source, volume prepared, preparation steps (who, how, where, when), monitoring procedures used, identification of critical control points and any corrective actions that were taken if necessary to correct inadequate monitoring procedures. 

If you need assistance with your risk assessment, please call Food Program Staff at 304-558-2981.  

D. Level of Compliance Noted During On-site Investigation(s)

<table>
<thead>
<tr>
<th>Observation</th>
<th>IN (In Compliance)</th>
<th>OUT (Out of Compliance)</th>
<th>NA (Not Applicable)</th>
<th>NO (Not Observed)</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Indicates the observation number in the Environmental Health Electronic Reporting System In/Out section.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Person in charge, present, demonstrates knowledge, and performs duties.</td>
<td>IN</td>
<td>OUT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Management awareness, policy present.</td>
<td>IN</td>
<td>OUT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Proper use of reporting, restriction and exclusion.</td>
<td>IN</td>
<td>OUT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Proper eating, tasting, drinking, or tobacco use.</td>
<td>IN</td>
<td>OUT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. No discharge from eyes, nose, and mouth.</td>
<td>IN</td>
<td>OUT NA</td>
<td>NO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Hands clean &amp; properly washed.</td>
<td>IN</td>
<td>OUT NA</td>
<td>NO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. No bare hand contact with ready to eat (RTE) foods or approved alternate method properly followed.</td>
<td>IN</td>
<td>OUT NA</td>
<td>NO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Adequate hand washing facilities supplied and accessible.</td>
<td>IN</td>
<td>OUT NA</td>
<td>NO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Food obtained from approved source.</td>
<td>IN</td>
<td>OUT NA</td>
<td>NO</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
10. Food received at proper temperature.  
11. Food in good condition, safe and unadulterated.  
12. (14)* Food-contact surfaces: cleaned and sanitized.  
13. (16)* Proper cooking time and temperatures.  
14. (17)* Proper reheating procedures for hot holding.  
15. (18)* Proper cooling time and temperatures.  
16. (19)* Proper hot holding temperatures.  
17. (20)* Proper cold holding temperatures.  
18. (21)* Proper date marking & disposition.  
19. (22)* Time as a public health control: procedures and record.  
20. (27)* Compliance with variance, specialized process and HACCP plan.  
21. (44)* Gloves properly used.

E. Corrective and Enforcement Actions

Check corrective or enforcement actions that were taken in response to the complaint.

- None
- Order for Correction Issued to correct violations relating to:
  - Risk factors and major interventions
  - Good retail practices
- Food Employee/Food Handling Procedures & Policies Modified
- Voluntary Disposal
- Emergency Suspension or Closure
- Food Employee/Food Handling Procedures & Policies Modified
- Food Employee Restriction/Exclusion
- Food Employee/PIC Training
- Press Release/News Alert
- Equipment/Physical & Sanitary Facilities Modified /Upgraded
- Other: (describe)

REMINDER: Submit the following documents along with this form to the Food Program Public Health Sanitation Division

1. Copy of Most Recent Inspection Report Issued Prior to Complaint
2. HACCP Risk Assessment and Related Environmental Data
3. Related Enforcement Documents
4. Mail or Fax To: Office of Environmental Health, Public Health Sanitation Division
   350 Capitol Street, Room 313 Charleston, WV 25301-3713  Fax (304) 558-1071