

Food poisoning complaint form



Please complete form and email back to environmental.health@bayswater.wa.gov.au

Complainants Details	
Name	
Person with illness	<i>(if not the person with the illness name and relationship of person giving information)</i>
Address	
Contact Number	
Email	
Food details	
Food consumed	
Food purchased from	
Date and time of food purchased	
Date and time food consumed	
Was there anything unusual about the food	<i>(Example funny smell, colour etc)</i>
Are there any leftover food	<i>(If yes, how have they been stored?)</i>
List of other foods consumed within the past 72 hours.	
Illness details	
Time symptoms started	
Details of symptoms	
Duration of illness	
Did anyone else consume the same food	<i>(If yes, how many others ate it? Were they ill?)</i>
Has a faecal sample been submitted to a doctor? <i>(Please note without a sample provided to a doctor will limit what legal action we may take against the food business)</i>	<i>(If yes, when?)</i>

What we will do

- Inspect the food business and take samples (if available) from the food business for lab analysis.
- If the leftover food has been stored correctly (ie: in the fridge) we will arrange to pick it up from the complainant and send for lab analysis.