

FOOD RECALL STATUS REPORT FORMAT
(to be given on Recalling Food Business operator's letterhead)

Date: _____

Food Authority's Unique Identification No. for Recall: _____

Name of the food _____ Brand Name: _____

Batch /Code Number: _____ Date of Mfg: _____

State Food Authority / Food Authority Contact: _____

Phone: _____ Email address: _____

Dear _____

_____ (Name of the recalling Food Business Operator) hereby submits the following Recall Status Report regarding the above-listed food

1. Quantity related details of implicated product before recall initiation

- a. Total produced: _____
- b. Total sold to Food Business Operator / individual in distribution channel: _____
- c. Total to be recalled: _____

2. Notification

- a. Total number of Food Business Operator / individual identified: _____
- b. Number of Food Business Operator / individual notified: _____
- c. Method of notification (check all that apply):
 - 1. Letter _____
 - 2. Phone _____
 - 3. FAX _____
 - 4. Email _____
 - 5. Other ___ (specify) _____

3. Food Business Operator Response

- a. Total number of Food Business Operator/ individual responding: _____
- b. Total number of Food Business Operator / individual not responding: _____
- c. Total quantity of food dispatched at Non-responding Food Business Operator/individual end: _____
- d. Number of packaged units and its amount sold to and returned by each responding Food Business Operator/ individual: _____

	<u>Sold</u>	<u>Returned</u>
	<u>Number</u> <u>Quantity</u>	<u>Number</u> <u>Quantity</u>
1. Food Business Operator/ individual		
2. Food Business Operator/ individual		
3. Food Business Operator/ individual		
4. Food Business Operator/ individual		
5. Food Business Operator/ individual		
(Add more as required)		

Total

e. Quantity of implicated product accounted for (Total amount in custody of recalling firm, including that recalled, expressed as percentage of total produced): _____

4. Effectiveness Checks

- a. Total number required: _____
- b. Total number completed: _____
- c. Completion date: _____

5. Estimated Recall Completion Date: _____

6. Proposed method of disposal of recovered stock/record of destruction:

7. Actions proposed to avoid recurrence in future

Sincerely,

Signature and title
Recalling Food Business Operator

Note:

- 1. Provide cumulative information.
- 2. The final status report to be attached with the Recall termination request shall provide decided method of disposal / records of destruction in point 5.