

FIRST SCHEDULE, *contd.*

FORM 4B

THE PUBLIC HEALTH ACT

CERTIFICATE OF CONDEMNATION AND SEIZURE OF FOOD UNFIT FOR HUMAN CONSUMPTION

To _____

of _____

Medical Officer (Health) for the parish of

_____ hereby certify that food found on the

of _____, 19____, at

Cross out which is inapplicable.

1. The food-handling establishment known as _____

_____ at _____ (Address)

2. _____ (State address or location food found)

and which was examined by me on the _____ day of _____, 19____, pursuant to regulation 18 (1) of the Public Health (Food Handling) Regulations, 1998, has been found to be unfit for human consumption and, pursuant to paragraph (2) (b) (ii) of that regulation, the food has been seized and condemned. You may, pursuant to regulation 33 (1), appeal against this decision.

Dated the _____ day of _____, 19____.

Medical Officer (Health)
for the parish of