

CUSTOMER COMPLAINT FORM

| 1. DETAILS OF COMPLAINANT | |
|---|-----------------|
| 1.1 Name : | |
| 1.2 Address : | ,,,,,,,,,,, |
| | |
| 1.3 Tel No. : | mail : |
| | |
| 2. DETAILS OF COMPLAINT | |
| 2.1 Activity: Certification/Training/Other (Delete whichever is | inapplicable) |
| 2.2 Description: | |
| | |
| 2.3 Date of occurrence : | |
| | |
| 3. Method of complaint: Verbal / Written (Delete whichever is | s inapplicable) |
| 4. DETAILS OF RECEIVER: | |
| 4.1 Name & Designation | |
| 4.2 Designation : | |
| 4.3 Date received : | |
| | |
| 5. ACKNOWLEDGED ON: | |
| 6. ACTION TAKEN: (Copies to be attached) | |
| 7. INVESTIGATION COMPLETED ON: | |
| 8. CUSTOMER INFORMED ON: | |
| 9. ANY OTHER INFORMATION : | |
| | |
| | |
| | |
| Signature of Certification Manager | Date |

Doc. No QP-10-F-01 Issue No.: 02 Issue Date : 2012-03-10

Reviewed and approved by: Director issued by: Management Representative