

	National Certification Division	NCD/FOM/10
Title:	Complaints and Appeals Form	Page 1 of 1

COMPLAINTS AND APPEALS FORM

1. Details of complainant/appellant

Name.....

Physical Address:

Home telephone number.....

Business telephone number.....

Mobile telephone number.....

E-mail address.....

Person to be Contacted.....Tel.....

Title and designation.....

Please tick as appropriate

Complaint Appeal

Note: An **appeal** is a request by an RSB client to RSB for reconsideration of a decision it has made relating to its certification activities. A **complaint** is an expression of dissatisfaction, other than appeal by any person or organization to RSB relating to its personnel or processes, where a response is expected.

2. Complaint/Appeal description (Problem encountered)

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3. Remedy requested (eg. Repair/rework of the product, exchange of the product, cancellation of sale, apology, price rebate of a specified amount, reimbursement of specified amount, payment of indemnification of specified amount, etc.)

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4. Type of complaint/Appeal (Tick where appropriate):

- Telephone Verbal Written
- E-mail delivered
- Any other means (specify)_____

Received by:.....**Date:**.....