

COMPLAINT / APPEAL / INFORMATION REQUEST (CAI)

Initiator	MEASURED ENTITY	DATE (*2)
TYPE OF REQUEST:	Complaint	
Definitions: Complaints: A formal complaint from a measure manner in which any aspect of the Appeals: A difference between the score a reinformation provided prior to verifice the technical signatory. Information Requests: A request for information regarding	Appeal Information Request red entity against the verification ager verification has been dealt with. measured entity feels it is entitled to, to cation, and the score awarded the me g the verification process or supporting easured entity or a 3rd party unrelated ertificate provided. tained from our website or by emailing information request:	based on the asured entity by g documentation d to the

	ΝΑΜΕ	SIGNATURE	DATE
COMPLAINANT / APPELLANT / INITIATOR:			
		EMAIL ADDRESS:	
PHYSICAL ADDRESS:		TEL:	
		Fax:	

For Office Use

	ΝΑΜΕ			
VERIFICATION ANALYST:				
VERIFICATION MANAGER:				
PERSON ASSIGNED TO INVESTIGATE (*1):				
INDEPENDENT PERSON / PERMISS TO DISCLOSE CONFIDENTIAL INFORMATION REQUIRED:	ION	YES NO		An independent person is required to investigate complaints and appeals. Permission from the measured entity to disclose information may be required by contract.

ACKNOWLEDGEMENT

We acknowledge receipt of your complaint / Appeal / Information Request and are in the process of completing an investigation. The outcome of the investigation will be communicated to you.

	ΝΑΜΕ	SIGNATURE	DATE
MANAGING DIRECTOR:			

INVESTIGATION, IMPLEMENTATION & REPORT For complaints and Appeals only

Findings and client recommendation

Recommended Corrective Action submitted by person assigned to investigate and approved by the Managing Director.

NOTE: A certificate may not be issued without identification of the root cause.

	NAME	SIGNATURE	
PERSON ASSIGNED TO INVESTIGATE			
MANAGING DIRECTOR:			DATE
WRITTEN RESPONSE PROVIDED TO	CLIENT:		
INDEPENDENT PERSON REQUIRED TO REVIEW AND REISSUE CERTIFICATE?			d appeals. e required, a different person is

APPROVAL

ROOT CAUSE AND INTERNAL CORRECTIVE / PREVENTIVE ACTION

For office use only

Root Cause of error (where applicable)

Corrective / Preventative Action (where applicable)

CORRECTIVE ACTION COMPLETE

	NAME	SIGNATURE	DATE
MANAGEMENT REPRESENTATIVE:			