EMI CERT	**Complaint Submission Form**	F.23 v. A.1 Page. 1 / 1

Date……

Applicant Elements	
Company Name:	
Telephone:	**Email:**
Type of communication:	Appeal ☐ Complaint ☐ Dispute ☐

COMPLAINT / APPEAL / DISPUTE Detailed Description (please refer to and attach related documented evidence if necessary):
PERSON SUBMITTING (signatory, seal/stamp):

VALIDITY OF COMPLAINT- ROOT CAUSE ANALYSIS:	
PERSON RESPONSIBLE:	**Date:**

SUGGESTED ACTIONS:	
Quality Manager:	**Date:**

CORRECTIVE and/or PREVENTIVE ACTIONS CONSIDERED NECESSARY:	
General Manager:	**Date:**

IMPLEMENTATION AND EFFECTIVENESS EVALUATION		
SATISFACTORY ❑	**ACCEPTABLE WITH CONCERN ❑**	**NON SATISFACTORY ❑**
COMPLETED AT: COMMENTS – REMARKS :		
QUALITY MANAGER		DATE: