



Ecomaster Global
Empowering your Excellence

Complaint form

Form code: F9.10-01

Issue No.: 01

Issue date: 01/09/2024

Revision No.: 01

Revision Date.: 29/09/2024

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Part (A): filled out by EMG staff and the appellant/complainant

Reference number of complaint/appeal

Type

☐ Complaint

☐ appeal

Name of receiver

Date

Method

☐ Verbal

☐ telephone

☐ document (as

attached)

Complainant /Appellant name

Company

Address

Telephone

Mobile

Official email address

Compliant/ appeal details

Date

signature



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part (B): filled out by the quality manager

The causes of the complaint

The actions to be take:

The decision

Name

Date

Signature

Name

Date

Signature

Name

Date

Signature

Part B: Filled by the quality manager

The root cause analysis:

the proposed date for solving the compliant/appeal:

the person who deals with the complaint/appeal:

is the compliant/appeal include non-conformity work (yes/No)

If yes, the proposed correction is:

Is there a need for corrective action (yes/No)

If yes, the corrective action:

The Proposed date for corrective action

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Quality manger signature		technical manager signature	
General manager approval			
Assessment of the corrective action			
If corrective action is accepted: Prosed time to implement corrective action:		If corrective action is rejected: Alternative corrective action proposed (if the corrective action is rejected) Proposed date for executing the alternative corrective action:	
Quality manager signature		Technical manager signature	
General manager approval			
Follow up the corrective action implementation			
Completed:	Postpended to date:	Non-completed because:	Need another one:
Quality manager		General manager approval	
Does the non-conformity requires updating risk register form (yes/no)?			
If yes, please go to risk register form and update it.			
Does the non-conformity require updating management system? (yes/No)			
If yes, please specify the document need updating			
Quality manager:		General manager:	
Signature:		Signature:	