



AIJ For Quality and Inspection

Document Name: COMPLAINT & ACTION

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COMPLAINT & ACTION FORM

<i>CLIENT NAME:</i>	<i>COMPLAINT NO.:</i>
<i>ADDRESS:</i>	<i>COMPLAINT RECEIVED BY:</i>
<i>TELEPHONE NO.:</i>	<i>DATE:</i>
<i>e-mail:</i>	<i>ISSUED TO FOR ACTION:</i>
<i>NAME/POSITION/CONTACT No. OF PERSON LODGING COMPLAINT:</i>	
<i>COMPLAINT DETAILS:</i>	
<i>ACTION TAKEN:</i>	
<i>ACTION TAKEN ACCEPTED BY:</i>	
<i>DATE:</i>	
<i>CATEGORY:</i>	<i>AUDIT ADMINISTRATION USER COMPANY</i>
	<i>AUDITOR CLAIMS/LOGO OTHER</i>
<i>CIRCULATION:</i>	<i>Client file Complaint file Client</i>