**No:** RACS/REC/17/XX

**Date:** dd/mm/yy

**Client Details:**

Please fill in the information *(Please add* ***N/A*** *if not applicable)*

|  |  |  |  |
| --- | --- | --- | --- |
| Client ID: |  | | |
| Name of Organization: |  | | |
| Address: |  | | |
| Email: |  | Telephone: |  |
| Contact Person: |  | Date of Application: |  |
| Date of Evaluation: |  | Date of Certification: |  |

**Case Details**:

|  |  |
| --- | --- |
| Type of Certification | ☐Facility  ☐ Product |
| Sector (Product/ Group) | ☐ Chemical  ☐ Halal Products  ☐ Food  ☐ Electrical |
| Scope of Certification | ☐ Cosmetics  ☐ Detergents  ☐ Perfumes  ☐ Tobacco (Cigarettes, Moassel, Dokha)  ☐ Children Toys  ☐ Oxo-Biodegradation of Plastic Bags and Other disposable plastic object.  ☐ Petroleum (Diesel, Lubricant Oils)  ☐ Retreaded Tires  ☐ Liquefied Petroleum Gas Cylinder (LPG)  ☐ Food Contact Material  ☐ Halal Food  ☐ Halal Cosmetics  ☐ Halal Slaughtering Houses  ☐ Paint  ☐ Pesticides  ☐ Organic Foods  ☐ Energy Drinks  ☐ Water  ☐ Electrical & Gas Appliances  ☐ Others, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **COMPLAINT INFORMATION** | |
| Complaint Date: | Complaint taken by: |
| Complaint Details:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Customer Signature | |

**For RACS Quality Certification Body use only:**

|  |  |
| --- | --- |
| **Identify cause of complaint:** |  |
| **Corrective Action taken**  **(If needed):** |  |
| **Personnel in-charge to Follow-up with Clients:** |  |
| **Client Feedback after follow-up** |  |
| **Reviewed by (with Remarks)** |  |
| **Position& Signature** |  |
| **Approved by (with Remarks)** |  |
| **Position& Signature** |  |