



COMPLAINT/Appeal Form

Issue/rev.NO  
#

1/1

Issue/rev.Date

1/1/2024-15/2/2026

Code #

GC/OP/9.7&8/FM-01

### COMPLAINT / APPEAL DESCRIPTION

Complaint date:

Complaint ref. No.

Complainant name:

Name of Complainant Company:

Complaint description: (Submit as much as possible details about what/whom the complaint concerns):



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Name of GREEN CERT personnel which has received the complaint:

Person in GREEN CERT responsible for checking if the complaint / appeal is founded:

Activities undertaken to verify if the complaint / appeal is founded:

The person responsible for resolving complaints / appeal:

Conclusion on the complaint /appeal decision:

Responsible person:

Date of closing complaint: