

COMPLAINT FORM

Identification of the Complainant

Name of person/organization submitting the complaint:		Date complaint submitted:	
Address of person/organization submitting the complaint:		E-mail:	
Status of the person/organization submitting the complaint:		NAB¹ ☐ CAB² ☐ Other ☐, please explain	
Information related to the Complaint			
Complaint regards:	☐ Activity of a CAB accredited by an EA member Please indicate the NAB's acronym: Please indicate the CAB's name:		
	☐ Activity of an EA Member Please indicate the NAB's acronym:		
	☐ Activity of EA		
Object and description of the complaint to be investigated by EA:			
< <object complaint="" of="" the="">></object>			
< <description of="" situation="" the="">></description>			

NAB = National Accreditation Body, member of EA
 CAB = Conformity Assessment Body, accredited by an EA member



Complaint was addressed first to the relevant NAB for resolution through the NAB's own complaints handling procedure:	☐ YES Please indicte the date when the process was closed at the NAB level: ☐ NO
Documentation in English submitted to EA to demonstrate that the complaint has already been submitted for investigation through the EA Member's own complaint handling procedure:	Not applicable (if complaint is against EA) <-indicate the list of documents demonstrating the closure of the complaint at NAB level>>
Documents in English submitted to EA which supports the complaint:	<-indicate the list the documents supporting the complaint submitted to EA>>
Any other relevant information:	