



BSS NDT Pvt. Ltd
INITIATING A FORMAL COMPLAINT AGAINST A CERTIFICATE HOLDER.

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Name of Complainant:	Complainant's Company/Employer:
Complainant's position in Company:	Nature of Company/Employer business:
Complainant's address:	
Complainant's telephone number:	Complainant's email address:
Date of complaint:	Isolated / Repetitive Incident:
Name of individual subject to complaint:	Unique Certification Number of Individual:
Is the nature of complaint 'Technical' or 'Code of Conduct':	
Summary of complaint:	
Signature of Complainant:	
Date:	

All complaints or appeals must be made in writing. Please send or email to info@bssndt.com