

	FORMAL COMPLAINT REGARDING SERVICE	MOD 10 B
		Rev. 0
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FIRST PART – DESCRIPTION OF THE CLAIM MADE BY THE CUSTOMER		
Customer:	Date of occurrence:	
Contract Ref.:	Service:	
Description of occurrence:		
<i>Date communication sent:</i>	<i>Signature of person detecting problem:</i>	
SECOND PART – RESOLUTION OF THE COMPLAINT		
Resolution Manager:	Date of completion:	
Actions implemented:		
Tests performed:		
<i>Date closure communication sent:</i>	<i>Service Manager Signature:</i>	
THIRD PART – ANALYSIS OF THE CLAM		
Necessity to modify the service:	RDM Ref.:	
Effectiveness of actions implemented:		
Consequences and notes:		
<i>Closure date:</i>	<i>Service Manager Signature:</i>	