

# Customer Complaint Non-Conformance Report

Report No:

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Date:

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Reported By:

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## Customer Information

Customer Name:

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Contact Person:

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Contact Details:

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## Complaint Description

Details of Complaint:

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Date of Occurrence:

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Product/Service Involved:

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Quantity:

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Reference (Order/Invoice No.):

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## Investigation & Root Cause

Description of Non-Conformance:

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Root Cause Analysis:

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Involved Department(s):

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**Corrective/Preventive Actions**

Proposed Actions:

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Person Responsible:

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Target Completion Date:

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**Verification**

Verified By:

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Date:

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Comments:

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