1. Completed by the person receiving the complaint:

|  |  |  |
| --- | --- | --- |
| Site / Facility / Office: | | Report no: |
| Name Surname/ Telephone of person receiving complaint: | | Date/time: |
| Who is issuing complaint? | What it concerns? | |
| ….……………………………………  Information provided voluntarily by the person issuing complaint for future feedback::  Name & Surname: …………………………………………..  Tel./ e-mail: .………………………………………………. | Short description of complaint: ……………………………………………  …………..………………………………………………………………….  ……………………………………………………………………………………………………………………………………………………………… | |

2.To be completed by the person responsible for the given area /facility/ office concerned by the complaint:

|  |  |
| --- | --- |
| Short description of situation: | |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
| Cause of the situation: | |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
| Proposed corrective action: | |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
| Name/ Surname/ Signature | Date: |

3. To be completed by Echo site Director:

Proposed corrective actions brought the expected results?



If „No” you have to analyse situation in point no 2 and put in place another Corrective actions.

Name/ Surname/ Date/ Signature: ……………………………………………………………………………….

4. Submission of the report to the EHS Department:

A copy of the report was forwarded to the EHS Department:



The person the report was sent to:………………………………

Date:…………………………