



## COMPLAINTS AND APPEALS FORM

Date of Receipt:

Reference No.:

This form should be submitted within 1 month of the issue complained about, or within 1 month from the publication of the inspection body decision.

- Before submitting this form, please consider speaking to a member of staff, e.g. Public Relations Officer, Complaints and Appeals Committee Representative, or the Inspection Body. They will be able to help you with the procedure.
- Please refer to the Appeals and Complaints Policies and Procedures before submitting this form. It can be provided to you upon request from [inspection@foodshap.com](mailto:inspection@foodshap.com).
- Evidence must be included with this form. If you cannot supply any, please give a reason.
- Please send a scanned filled-up form to '[inspection@foodshap.com](mailto:inspection@foodshap.com)' or hand it in at the FoodSHAP® office in Primeland Building, Madrigal Business Park, Alabang, City of Muntinlupa.

### DETAILS

Contact Person:	Client Number:
Company:	Company Address:
Company Telephone Number:	Company Cellphone Number:
Company E-mail Address:	Company Fax Number:
Inspection Service(s) Done:	Date of Inspection:



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## IS THIS A COMPLAINT OR APPEAL?

This form covers the FoodSHAP® Inspection Services Complaints and Appeals Policy and Procedures.

A complaint is a specific issue regarding the provision of an inspection service, e.g. result inquiry, certificate, materials used, inspection fees, and the schedule of inspection. It also covers the provision of other, non-inspection services, e.g., accommodation, communication, information.

An appeal is a request for a review of the decision of the Inspection Body. The Complaint and Appeal Committee of the Inspection Body is responsible for the assessment of the specified services and for considering the clients results.

Please indicate whether you think this is a Complaint or an Appeal by ticking (✓) one of the boxes below. If it falls into both, please tick both boxes.

Complaint  Appeal\*

\*An Appeal can be based on one or more grounds, if you think your dispute relates to one or more of these, please tick applicable boxes.

(a) the assessment was not conducted in accordance with the regulations for the service.

b) the judgment of an inspector(s) was affected by personal bias.

c) there was an administrative error or some other irregularity in the conduct of the assessment causing the assessment decision to be significantly different.

*In order to process your complaint or appeal correctly, please note, the final decision to which procedure your dispute falls under and which grounds will be taken by the Complaints and Appeals Committee.*

## NATURE OF THE APPEAL OR COMPLAINT

### Summary

Please include a detailed summary of the main points and outline any steps you have already taken to resolve your issue. You may also attach a separate statement (Please write 'see attached' in the first box at the next page).

It is important to include all relevant points. This should normally be achievable in less than 1,000 words. To help focus your summary, it is recommended you do not exceed 2,000 words.

It is often useful to speak to a staff member or the Inspection Body before submitting this form. Please tick this box if you have already spoken to someone



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**Your desired outcome** (If there is something specific you want the Inspection Body to do in response to your complaint, please write this in the box below).



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**Your evidence** (If you cannot provide evidence, please explain why you cannot in the box below).

## CONFIDENTIALITY

In order to investigate, clarify and pursue your appeal, it will normally be necessary to discuss relevant details of your case with the Inspection Body. This will be done with consideration for confidentiality and information will only be shared if it is necessary.

If you do not wish for us to discuss your case with appropriate members of the staff, please tick this box.

Please note that by ticking this box, you will be contacted about possible next steps.

## DECLARATION

*I hereby certify that the above information is true and accurate to the best of my knowledge and belief.*

Signature: .....Date\*: .....

\*Applicable timescales will begin from the date this form is received by the Public Relations Officer.