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## CLIENT DETAILS

**NAME OF COMPANY:**

**ADDRESS:**

**Telephone number, FAX:**

**Protocol Number of Project:**

**Procedure that concerns the complaint:**

Assessment procedure	Results of assessment	Other
Suitability of Equipment	Suitability of Employees	Suitability of Offices
Other(describe)		

*Note: In each box tick (✓) the complaint for the particular procedure*

### Detailed Description of the complaint:

Date of submission of the complaint:	Full name & Position of the authorized person that submitted the complaint:
The Technical Manager was informed (date & signature):	

### Assessment of the complaint and Result:

Date of the assessment of the complaint:	Signature of the Responsible Quality Assessor:

**Actions taken to Improve:**

*The code number of the related action taken*

**Formal Written statement to the client that submitted the complaint:**

*The date of the document is referred and there is also a copy attached with the signature of the Technical Manager*