



## Customer complaint form

**Company information:**

Contact Name: \_\_\_\_\_

Contact Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone / Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

**Order information:**

Customer Contract/ P.O. Number: .....

Invoice No.: .....

**Product information:**

Description (Dia, Grade) .....

Certificate No /Heat No: .....

**Complaint details:**

**Date submitted:**

**Person submitting this form:**

**Taken an activity:**

NCR No.:

NCR is closed by Quality Manager:

Note:

Yes:  No:

**Quality Manager Hermith GmbH:**

**Date:**

**Signature\*:**

\* **Note:** for documents in electronic form the column «signature» is not to fill