



# Compliant and Appeal Form

Doc # IFANCA/03/21  
Rev # 00  
Issue Date 01-06-2018

Appeal # \_\_\_\_\_

Date: \_\_\_\_\_

Department Initiator \_\_\_\_\_

Name of Initiator: \_\_\_\_\_

Type of Appeal (External / Internal) \_\_\_\_\_

Nature of Appeal: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Signature of Initiator ( \_\_\_\_\_ )

Is Appeal related to Halal? (Yes/No) \_\_\_\_\_

If Yes, Explain what type of Appeal? \_\_\_\_\_

Complaint forwarded to country Director (Yes / No) \_\_\_\_\_

Name of Country Director: \_\_\_\_\_

Reason of Appeal: \_\_\_\_\_

\_\_\_\_\_  
Action Taken: \_\_\_\_\_

\_\_\_\_\_  
What Preventive measures will be taken? \_\_\_\_\_

\_\_\_\_\_  
(Signature of concerned authority)

Is Appeal Closed? (Yes / No) \_\_\_\_\_

Remarks \_\_\_\_\_

\_\_\_\_\_  
Certification Department \_\_\_\_\_