

COMPLAINTS and APPEALS

Authority	The Quality Manager of the PCTEST CB approved this Guide.
Policy & Purpose	It is the policy of PCTEST CB to subject all appeals, complaints, and disputes to the established procedure as required by section § 7.13 of ISO/IEC 17065. The purpose of this procedure is to keep a record of all appeals, complaints, and disputes. Remedial actions relative to certification and appropriate subsequent action taken shall be noted and its effectiveness shall be documented.
Applicability	This policy applies to all customers and employees of PCTEST CB.
Summary	All employees of PCTEST shall cooperate at all times to see that the proper procedure and handling of appeals, complaints and disputes, are followed.

COMPLAINTS AND APPEALS, DISPUTES PROCEDURES

1. In the event that complaints are brought to the CB's attention, the following steps shall be carried out.
 - a.) As much information as possible should be gathered on the nature of the complaint or anomaly. This information will be documented on a Complaints and Appeals Form (PCTEST Document No.: PCB7.13.1) which may be provided to the Complainant for completion, if appropriate. Complainant / Appellant may also be provided with a description of the appeals process and timelines, if appropriate.
 - b.) The complaint sheet describing the complaint and/or anomalies shall be forwarded to the Quality Manager within five (5) business days of submission. The Quality Manager will acknowledge receipt of complaint to complainant within ten (10) working days of complaint submission, as well as provide a response or course of action to complainant within ten (10) days, in the appropriate circumstances.
 - c.) The complaint or anomaly shall be investigated immediately by the Quality Manager and any other appropriate staff who were not directly involved with the complaint. If the complaint or anomaly is considered serious enough to affect the grant issued by The CB or measurements and test results of the laboratory, then an audit, as described in §2 below, shall be conducted by the Quality Manager. Audits and/or investigations will be processed within 30 days.
 - d.) In the event that the complaint cannot be handled at the Laboratory level, PCTEST's management shall be informed for further action and instruction.
 - e.) When appropriate, complainants will be notified in writing of the outcomes of all investigations and audits as soon as the information is available to the Laboratory; within a maximum limit of five (5) business days after completion of audit.
 - f.) See also Disputes and Appeals (Section §6 of the Certification Agreement Terms and Conditions).

PCTEST CB Document No.: PCB7.13 Rev 1
Complaints and Appeals

Approved by:	Quality Manager
Effective Date:	October 1, 2016

2. Complaints requiring auditing from non-participatory parties.

In the event that a complaint cannot be settled internally the following actions will transpire:

- a.) A non-participatory committee of five (5) will be formed to include the following:
 - 1. (1) Representative of PCTEST Lab
 - 2. (1) Technical Expert of PCTEST CB
 - 3. (1) Representative of Manufacturer
 - 4. (1) Representative of Subcontractor
 - 5. (1) User / Public
- b.) The committee shall be structured to foster confidence in the complaint / appeals process. This committee shall be agreeable and approved by all.
- c.) On the request of the committee, PCTEST shall provide the committee all the necessary information, including the reason(s) for all significant decisions, actions, and the selection of persons responsible for particular activities, in respect to the complaint, to enable the committee to ensure proper and impartial judgment.
- d.) Each member shall have equal voting rights to ensure impartiality of the committee.

3. **PROCEDURE TO FILE COMPLAINT**

- a.) In the appropriate circumstances, the customer shall request PCTEST Complaints and Appeals Form (reference PCTEST Document No.: TCB7.13.1) from any PCTEST employee or supervisor. All personnel are required to promptly act. These referenced forms will always be visibly placed at the reception desk area and copies archived in the Records Office. In other situations, for example, a request for additional information from a regulatory agency, the request itself will initiate the procedure, in which the appropriate PCTEST employee will fill out the form.
- b.) No PCTEST employee shall argue with any customer in any way or manner. He/she is required to direct customer to his/her supervisor who in turn assist the complainant.
- c.) Give all necessary information regarding the nature of the complaint; including, but not limited to, the following:
 - 1. Date and time of incidence;
 - 2. Location of incidence;
 - 3. Name or names of personnel involved;
 - 4. Detailed description of the incident. Given the nature of the event or how the incident occurred in detail, note number of occurrences, any physical injury involved, any damage to equipment, etc.
 - 5. Request for immediate action or urgent answer; and
 - 6. Description of treatment received after requesting this form.
- d.) Once the form is completed, it is given to the supervisor for delivery to the Quality Manager.

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e.) All complaints can alternatively be directed to:

Quality Manager, PCTEST CB

6660 Dobbin Road Suite A

Columbia, MD 21045

phone: +1.301.596.2120

fax: +1.410.290.6654

email: quality@pctestlab.com / pctesttcb@pctestlab.com

4. PROCEDURE TO RESPOND TO REGULATORY BODY REQUESTS FOR INFORMATION

a.) If a Regulatory Body (e.g., FCC, ISEDC) requests additional information about a grant issued by PCTEST CB, the Project Coordinator initiates the process of responding by informing the Chairs of the Quality and Technical, Review and Grant Approval, and Record and Reports Committees, as well as the Technical Reviewer and Grant Decision-maker involved with the specific grant under consideration, and the Quality Manager. Depending on the nature of the request, either the Technical Reviewer or the Chair of the Record and Reports Committee will determine who will be responsible for the response. The Project Coordinator fills out the preliminary information in the CA database.

b.) If necessary, the Technical Reviewer or the Project Coordinator contacts the Applicant in order to obtain the requested information. Once the response is submitted to the Regulatory Body, the person responsible for it fills out the necessary information and informs the Quality Manager, who then determines if an Internal Audit is required. If such an audit is required, the normal procedure for Internal Audits is followed (see document PCB4.7.1.1). Once completed, the Internal Audit Form is placed in the RT folder.

c.) If it is determined that an Internal Audit is not required (i.e., the cause of the request was not a systematic problem of PCTEST), the Project Coordinator closes in the RT in the CA database.

Review and Revision History:

Review / Revision Date	Revision No.	Details:
April 1, 2014	Rev 0	New Document Effective Date
September 18, 2015	Rev 1	This document was reviewed for accuracy by Quality Management.
October 1, 2016	Rev 1	<ul style="list-style-type: none"> ➤ Changed “IC” to “ISEDG” ➤ Document was reviewed for accuracy by Quality Management and effective date changed

