

## **GGASF-005** Greenhouse Gas Assurance Services Complaints and Appeals Form

Please fill in the form below to record a complaint or an appeal. The information provided will solely be used for the investigation and will remain confidential.		
This form is used to record a:	Complaint	☐ Appeal
Please provide your full contact	information:	
Name:		
Company: Address:		
Telephone: Email:		
Please describe the nature of yo	our complaint or appea	l in as much detail, as nossible:
Thease describe the nature of ye		
Project name of the project subj	ect to complaint or apr	and (if applicable):
	ect to complaint or app	
Team Member who is subject of the complaint or appeal (if applicable):		
Date of complaint or appeal req	uest (dd/mm/yyyy)	

Forms can be faxed or emailed to the attention of the GGAS Programme Manager, GGAS Manager, or GGAS Principal. For contact information, please refer to the GGAS Management Team List.