# AIC Complaint Notification Form

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| Date: |
| Your Details |
| Name: |
| Company: |
| Telephone Number (with dialling code): |
| Email: |
| Details of Referral/Complaint |
| Name of AIC Certificated Company: |
| Address: |
| AIC Scheme Number (if known): |
| What activities take place on the site (e.g. Storage of Combinable Crops, Production of Compound Feeds etc.: |
| Nature of Complaint |
|  |
| Incident date: |
| Nature of relationship of caller to AIC certificated company: |
| Are you happy to be contacted for further information / update on investigation YES / NO |
| **Please send any photographs or other evidence you may have with this form** |