



For any complaint, customers should be receiving an answer or an acknowledgement letter within 5 days after the letter has been received. For complaints which request in-depth analysis and process review, the follow-up will be managed by an identified person.

***Customer Complaint Management***  
***QHSSE Group Policy***  
***Group QHSSE 004-PO***  
*10 – November 2018*



|              |  |                |               |
|--------------|--|----------------|---------------|
| Title:       | Group QHSSE 004-PO Customer Complaint Management | Version :      | 10            |
| Code number: | Group QHSSE 004-PO                               | Version date : | November 2018 |

## 1 – Purpose & Scope of Application

The purpose of this Group policy is to identify a standard and structured process for the management of Customer Complaints received by Bureau Veritas. The purpose of this policy is to communicate the standard process to all operations to ensure that all complaints are handled in a professional and responsible manner.

Bureau Veritas definition of a complaint:

**A complaint is a formal statement of dissatisfaction or disagreement (letter, feedback from a call) in relation with a contract or a service; it can be received from a client, a public administration or any other interested party.**

*Note: A complaint is to be distinguished from a formal claim or litigation which is dealt with in the Group Corporate Governance and Risk Management Policy.*

The main benefits associated with the implementation of this policy are:

- Direct benefit:  
It's a simple process to manage customer dissatisfaction and minimize risk to Bureau Veritas business and to monitor the progress leading to continuous improvement.
- Indirect benefit:  
The improvement in applying a standard response time will add to the reputation and image of Bureau Veritas.

The boundaries of this policy are:

- Scope in:
  - Complaints from clients and authorities
  - Verbal and written complaints
- Scope out:
  - Preventive and corrective action
  - Handling of non-conformity
  - Control of operational records
  - Claims management

This Policy applies to Bureau Veritas Group, worldwide, including all Divisions, Operating Groups and support functions. Compliance is mandatory for all.

Compliance to this requirement is expected as follows:

- Within 12 months after initial issuance
- Within 12 months after acquisition date for acquired entities
- Within 6 months after issuance of a revised version of the document.

### KEY PRINCIPLES

- Received complaints must be recorded and details must be transmitted to the relevant business units for processing <sup>(1)</sup>.
- In case of complaint received from a “party” which is not a Bureau Veritas client, due consideration must be given whether or not it is appropriate to answer, taking into account potential liability. In such cases, the content of the answer must be coordinated with the client.
- The Business Unit manager is in charge of dealing with the complaint and keeping the customer informed within the maximum delay of **5 days** after the complaint is received.

*(1) No express acknowledgement of fault or error should ever be made, even when offering and proposed solution to a client, because any such acknowledgement could invalidate any available Bureau Veritas insurance in place.*

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- In case the complaint is received from a Key Account, the Business Unit manager n+1 and the corresponding Key Account manager are kept informed.
- An overall review of customer's complaints process must be part of the annual Management System Review.

## PROCESS STEPS

For each complaint, a structured process must be followed, which addresses the following points:

1. Record the complaint in **QESIS** and describe the problem with its business impacts
2. Communicate the details of the complaint and findings to the relevant internal parties
3. In case of a complaint involving a possible litigation, insurance declaration, court summons or loss of image or accreditation, transfer the complaint to the regional or the HO Divisional legal contact.
4. Otherwise, manage the complaint as follows:
  - If the complaint may be solved very quickly or immediately, implement the solution, answer to the customer within the 5 days after the complaint was received and record the "answering date" KPI. Then keep processing the standard process as indicated below in order to avoid reoccurrence.
  - If additional investigation is needed: send a written acknowledgement letter of the complaint to the customer not later than five days after the complaint was received. This letter should contain Name and details of the Bureau Veritas manager in charge of this analysis and of the relationship with the customer. The nominee is in charge to:
    - Identify the root causes of the problem as per Group QHSSE 107-PR Root Cause Analysis
    - Propose a corrective action plan and start implementation
    - Monitor the implementation of the corrective action, check effectiveness and keep customer and other internal parties (in case of key account) informed
    - Maintain documents and ensure traceability
    - Check sustainability of the results and closing when solved
    - Keep the customer informed upon needs.

## 2 – Review and Control Process

The Group Q & **HSSE** Statements, Policies and Procedures are reviewed annually or if a significant change occurs. This document is uncontrolled once printed.

Validation and communication are ensured according to the Group documents management process.

**QHSSE** Managers remain responsible for integration of this policy into their management system.

Compliance with this policy is ensured through:

- Group, Divisional, Operating Group, Regional, Country internal reviews
- External audits

**Group audits will be based on the following checklist:**

| No. | Elements to be examined  |
|-----|--|
| 1   | Customer complaints are received, documented and answered within an appropriate delay. |
| 2   | Complaints are analyzed for trends. Actions are implemented in the processes           |
| 3   | Complaints are documents in <b>QESIS</b> Tool.   |
| 4   | Major complaints undergo an RCA process as per Group QHSSE 107 PT.                     |
| 5   | Customer complaints are visible in the CRM tool.                                       |

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### 3 – Associated Process Descriptions & Reference to Standards

#### Supporting and associated documents:

| Title   | Type       | Location    |
|---|------------|-------------|
| Group QHSSE Manual  | Manual     | Connections |
| Group QHSSE 006-PO Preventive & Corrective actions                  | Policy     | Connections |
| Group QHSSE 002-PO Handling of non-conformity                       | Policy     | Connections |
| Group Corporate Governance and Risk Management Policy               | Policy     | Connections |
| Group QHSSE 004-G QESIS - Complaint and Quality Incident User Guide | User guide | Connections |

#### Compliance to standards:

|                 |       |                                     |
|-----------------|-------|-------------------------------------|
| ISO 9001:2015   | 7.4   | Communication                       |
|                 | 8.2.1 | Customer communication              |
|                 | 8.6   | Release of products and services    |
|                 | 9.1.3 | Analysis and evaluation             |
|                 | 10.2  | Nonconformity and corrective action |
| ISO 17020: 2012 | 7.5   | Complaints and appeals              |
|                 | 7.6   | Complaints and appeals process      |
| ISO 17021: 2015 | 9.8   | Complaints                          |
| ISO 17025: 2017 | 7.9   | Complaints                          |

### 4 – Document Validation and History

#### Validation:

|          | Proposal                          | Verification  | Approval             |
|----------|-----------------------------------|---------------|----------------------|
| Name     | Vicdan Uzunoglu                   |               | Nicolas Guibout      |
| Function | Group Safety and Security Manager | QHSSE Network | Group QHSSE Director |
| Date     | 07/11/2018                        | 22/11/2018    | 30/11/2018           |

#### Revision History:

| Version | Date          | Comments   |
|---------|---------------|--|
| 1       | 2005          | Group reference document   |
| 2       | June 2008     | Alignment of policy with the Quality manual (Revision 1.1 of the 01/11/2007) |
| 3       | May 2009      | Review by the TQR policy making group  |
| 4       | July 2009     | Update reference to ISO 9001:2000 to ISO 9001:2008                           |
| 5       | July 2011     | Feedback from Network taken into account                                     |
| 6       | July 2014     | KPIs changed – Answering date & hit rate introduced.                         |
| 7       | December 2015 | Combination of Q & HSSE  |
| 8       | December 2016 | Alignment on ISO 9001:2015 and ISO 14001:2015                                |
| 9       | April 2018    | Alignment with the new tool QESIS  |
| 10      | November 2018 | Correcting versions of technical standards                                   |