



BM RATING AGENCY (PTY) Ltd

Registration number: 2023/607460/07

CAI NUMBER

113 Pelargonium Street
Midrand
1685

Complaint Appeal Information

COMPLAINT / APPEAL / INFORMATION REQUEST (CAI)

INITIATOR	MEASURED ENTITY	DATE ^(*)
TYPE OF REQUEST:	Complaint	
	Appeal	
	Information Request	
Definitions: Complaints: A formal complaint from a measured entity against the BEE Rating Agency, regarding the manner in which any aspect of the verification has been dealt with. Appeals: A difference between the score a measured entity feels it is entitled to, based on the information provided prior to verification, and the score awarded the measured entity by the technical signatory. Information Requests: A request for information regarding the verification process or supporting documentation substantiation a score, from the measured entity or a 3rd party unrelated to the verification, but reliant upon the certificate provided. A copy of the CAI procedure can be obtained from our website or by emailing [info@bmrating.co.za]		



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**Description of complaint/ appeal or information request: (Completed
by Complainant / Appellant / Initiator)**



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	NAME	SIGNATURE	DATE
COMPLAINANT / APPELLANT / INITIATOR:			
PHYSICAL ADDRESS:		EMAIL ADDRESS:	
		TEL:	
		FAX:	

FOR OFFICE USE

	NAME
VERIFICATION ANALYST:	
VERIFICATION MANAGER:	



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PERSON ASSIGNED TO INVESTIGATE			
INDEPENDENT PERSON / PERMISSION TO DISCLOSE CONFIDENTIAL INFORMATION REQUIRED:	YES NO	☐ ☐	An independent person is required to investigate complaints and appeals. Permission from the measured entity to disclose information may be required by contract.

ACKNOWLEDGEMENT

We acknowledge receipt of your complaint / Appeal / Information Request and are in the process of completing an investigation. The outcome of the investigation will be communicated to you.

	NAME	SIGNATURE	DATE
[TITLE]			

INVESTIGATION, IMPLEMENTATION & REPORT

For complaints and Appeals only

Findings and client recommendation

Recommended Corrective Action submitted by person assigned to investigate and approved by the Executive Team.

NOTE: A certificate may not be issued without identification of the root cause.

	NAME	SIGNATURE	
PERSON ASSIGNED TO INVESTIGATE			
EXECUTIVE TEAM MEMBER			DATE
WRITTEN RESPONSE PROVIDED TO CLIENT:			
INDEPENDENT PERSON REQUIRED TO REVIEW AND REISSUE CERTIFICATE?	YES NO	☐ ☐	An independent person is required to investigate complaints and appeals. If changes are required, a different person is required to review and reissue.



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ROOT CAUSE AND INTERNAL CORRECTIVE / PREVENTIVE ACTION

For office use only

Root Cause of error (where applicable)

Corrective / Preventative Action (where applicable)

CORRECTIVE ACTION COMPLETE

	NAME	SIGNATURE	DATE
MANAGEMENT REPRESENTATIVE:			