

FORM BANDING

APPEALS FORM



PEMOHON <i>APPELLANT</i>			
PERUSAHAAN <i>COMPANY</i>			
ALAMAT <i>ADDRESS</i>			
TELEPHONE		FAX	
E-MAIL		TANGGAL <i>DATE</i>	
DOKUMENTASI TERLAMPIR <i>ATTACHED DOCUMENTATION</i>			
RINCIAN BANDING: <i>DETAILS OF APPEAL</i>			
RINCIAN UNTUK MENENTUKAN INVESTIGASI PENYEBAB BANDING DAN KEBUTUHAN TINDAK PERBAIKAN: <i>DETAILS OF INVESTIGATION INCLUDING DETERMINATION OF THE CAUSE OF THE APPEAL AND THE NEED FOR CORRECTIVE ACTIONS:</i>			
REKAMAN TINDAKAN YANG DIAMBIL DAN PERSYARATAN AGAR TIDAK KEMBALI TERJADI: <i>RECORD OF ACTION TAKEN AND POTENTIAL REQUIREMENTS TO PREVENT RECURRENCE WHERE POSSIBLE:</i>			
TANGGAL: <i>DATE:</i>		TINDAKAN YANG DIAMBIL DITINJAU DAN EFEKTIF <i>ACTIONS TAKEN REVIEWED AND EFFECTIVE</i>	

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TINDAKAN DITERIMA OLEH (PEMOHON): <i>ACTION ACCEPTED BY (APPELLANT):</i>		KOMITE KETIDAKBERPIHAKAN <i>IMPARTIALITY COMMITTEE</i>		DIREKTUR PT ACube TIC International <i>PT ACube TIC International DIRECTOR</i>	
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