



**1.0 Purpose**

This procedure describes the approach for handling enquiries and complaints regarding SEEC's environmental performance, addressing deviations from the requirements of SEEC's EMS so as to ensure a systematic process to identify and address nonconformities through both corrective action and preventive action.

**2.0 Scope**

This procedure applies to handle :

- a) enquiries (both internal and external) regarding SEEC's EMS or environmental performance;
- b) complaints (both internal and external) regarding SEEC's EMS or environmental performance;
- c) nonconformities related to SEEC's EMS requirements, shall include but not limit to below :
  - internal procedure non-compliance identified during regular monitoring / review
  - nonconformities identified in internal audits
  - nonconformities caused by suppliers / contractors / service providers

This procedure also addresses nonconformities through corrective and preventive actions so as to minimize impacts to environment and potential for reoccurrence.

**3.0 Reference Documents**

Section 4.4.3, EMS Manual

Section 4.5.2, EMS Manual

Section 4.5.3, EMS Manual

EP-04 Control of Documents

EP-06 Environmental Monitoring and Evaluation of Compliance

EP-08 Control of Records

EP-09 Internal Audit

**4.0 Definitions**

- |               |                                             |
|---------------|---------------------------------------------|
| EMR           | – Environmental Management Representative   |
| CAR           | – Corrective Action Report                  |
| EMS Committee | – Environmental Management System Committee |
| NC            | – Nonconformity related to SEEC's EMS       |

**5.0 Responsibility****5.1 Environmental Management Representative**

The Environmental Management Representative (EMR) shall ensure the requirements of this procedure are implemented. The EMR oversees the enquiries and complaints regarding the EMS and control of all nonconformities in relation to the EMS implementation, ensuring the effective and appropriate corrective and preventive actions are taken to prevent the NC from recurring.

## 5.2 Departmental Manager

The Departmental Manager shall maintain the communication log (EF-EP07-03), handle enquiries / complaints / NC, investigate the causes or potential causes of NC, and verify the implementation of appropriate corrective and preventive actions and maintain relevant records.

## 5.3 Staff of SEEC

Staff of SEEC shall report any enquiries / complaint / NC to their responsible supervisor and implement corrective and/or preventive action as instructed by the relevant Departmental Manager.

## 6.0 Procedure

### 6.1 Handling Enquiries / Complaints

6.1.1 All staff shall report any enquiries / complaint / NC (both internal and external) to their responsible supervisors and such enquiries / complaint / NC shall be recorded and tracked in the log sheet maintained by the Departmental Manager.

6.1.2 To handle complaints, the responsible personnel shall consult the EMR to determine the appropriate corrective and preventive actions and to ensure the actions are implemented effectively to rectify the problem.

### 6.2 Handling NC Identified Internally

6.2.1 Whoever raises an NC shall initiate the CAR by completing Section 1 & 2 of the CAR Form (as shown in Appendix 1) for endorsement by the respective Departmental Manager. The EMR shall be responsible to monitor the CAR status and maintain the log.

6.2.2 The CAR recipient, upon consultation with the EMR shall investigate the root causes of NC and complete the CAR.

6.2.3 Any changes of the EMS documentation as required by the CAR shall be reflected through amending respective procedures or instructions. The EMR shall ensure that these changes are communicated to all relevant staff.

### 6.3 Review by EMS Committee

6.3.1 EMS Committee will review and discuss any significant issues regarding the enquiry / complaint / CAR / nonconformities identified, and determine any preventive actions shall be taken for continual improvement of the EMS and environmental performance of SEEC.

6.3.2 The effectiveness of corrective and preventive actions taken shall be reviewed.

## 7.0 Records

Record Description	Record Location/ Retention Responsibility	Minimum Retention Time
Corrective Action Report (CAR) (EF-EP07-01)	EMR / Departmental Manager	3 years
CAR status log (EF-EP07-02)	EMR	3 years
Communication Log (EF-EP07-03)	EMR / Departmental Manager	3 years
Enquiry / complaint log and correspondences (Refer to <a href="#">separate enquiry / complaint</a> )	EMR / Departmental Manager	3 years

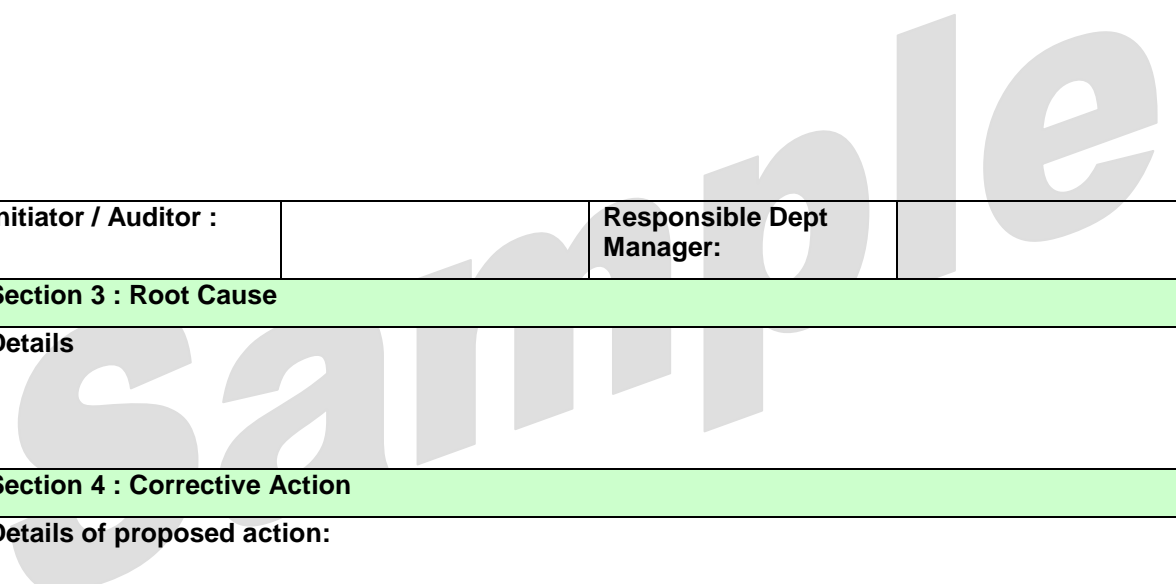
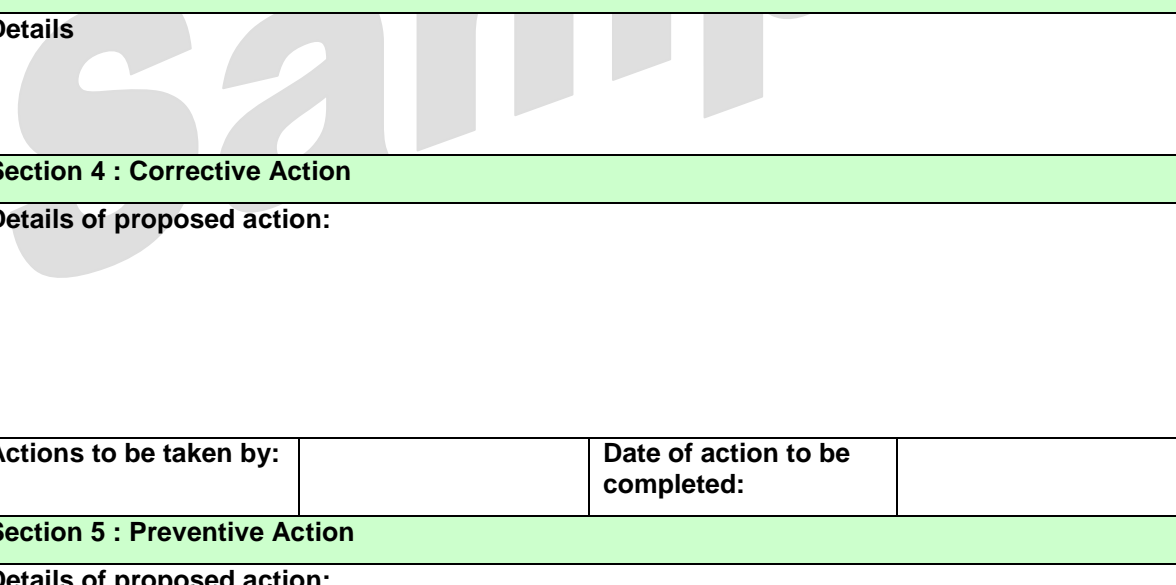
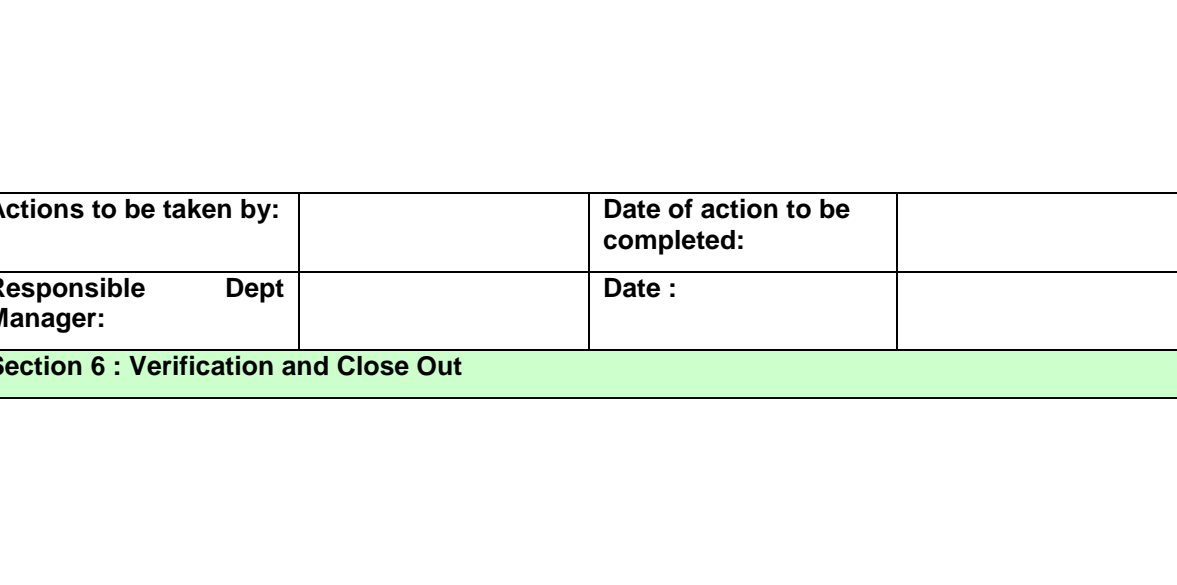
log for details)		
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**8.0 Appendix**

Appendix 1 : Corrective Action Report (CAR) (EF-EP07-01)

Appendix 2 : CAR Status Log (EF-EP07-02)

Appendix 3 : Communication Log (EF-EP07-03)

Section 1 : General Information			
Department / Function concerned :		CAR No:	
ISO 14001 clause Reference :		Reference Procedure :	
Initiator / Auditor :		Auditee (if applicable) :	
Section 2 : Nonconformity Details			
Details <i>(include where in the organisation the finding was identified)</i>			
			
Initiator / Auditor :		Responsible Dept Manager:	
Section 3 : Root Cause			
Details			
Section 4 : Corrective Action			
Details of proposed action:			
			
Actions to be taken by:		Date of action to be completed:	
Section 5 : Preventive Action			
Details of proposed action:			
			
Actions to be taken by:		Date of action to be completed:	
Responsible Dept Manager:		Date :	
Section 6 : Verification and Close Out			

Verification details:

Verified by :

(Signature)

Date:

CAR No	Date CAR issued	Raised from *	Dept / Project concerned	Responsible personnel	Target completion date	CAR close out date

\* CAR raised from : Internal Audit (IA) / Complaint (C) / Regular Monitoring (M) / Management Review (MR) / others as specify

No	Date	In / Out ?	From	To	Description	Follow Up	Reviewed by EMR	Reference Document

Sample