

	INTERNATIONAL STANDARDS REGISTRAR	Doc. Ref	Annexure 70
	APPEAL FORM	Reviewed by	Director- Operation
		Approved by	Director - Certification
		Issue no	01
		Issued Date:	12/08/2025
		Rev No	00
		Rev. Date	--

1. Appellant Information

Field	Details
Name of Appellant	
Organization Name (if any)	
Designation/Title	
Contact Number	
Email Address	
Address	

2. Appeal Details

Field	Details
Date of Appeal Submission	
Certificate/Audit Reference Number	
Certification Standard (e.g., ISO 9001/ ISO 22000)	
Scope of Certification	
Type of Appeal (Please tick)	<input type="checkbox"/> Certification Decision <input type="checkbox"/> Audit Finding <input type="checkbox"/> Other: _____
Description of the Appeal	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Supporting Documents Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please list them)

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3. Declaration by Appellant

I hereby declare that the above information is true and complete to the best of my knowledge. I understand that ISR (Pvt) Ltd will process this appeal in accordance with its documented appeals process and ISO/IEC 17021-1:2015 requirements. I agree to cooperate fully during the appeal resolution process.

Signature of Appellant: _____

Date: _____

4. For ISR (Pvt) Ltd Use Only

Field	Details
Appeal Reference Number	
Date Received	
Name of Person Receiving the Appeal	
Acknowledgment Sent to Appellant	<input type="checkbox"/> Yes <input type="checkbox"/> No (Date: _____)
Appeal Handling Officer/Committee	
Appeal Investigation Start Date	
Appeal Investigation Completion Date	
Decision on Appeal	
Decision Communicated to Appellant	<input type="checkbox"/> Yes <input type="checkbox"/> No (Date: _____)
Further Action Required	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, specify below)