

Rule for Handling Complaints

VLAC-VR109 :2026



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Voluntary EMC Laboratory Accreditation Center Inc.
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1. Scope

This rule stipulates the policy and procedure for responding to complaints received by VLAC.

2. Policy

VLAC will prioritize complaints about accreditation activities over other operations.

3. Procedures

Respond to complaints by following the steps;

3.1 Complaint reception and handling treats complainants fairly without discrimination. If we receive a complaint from an accredited laboratory or an individual or organization that uses the accredited laboratory, we will immediately notify all of them, **Business Administration Manager will lead the response** and **according to the necessity**, hold a complaint response meeting chaired by the Business Administration Manager.

3.2 Complaints are analyzed at the complaint handling meeting. Check whether the complaint is related to the **accreditation** activity, and if it is related to the **accreditation** activity, take the following measures depending on whether the target is a laboratory or VLAC.

-In the case of a complaint against a laboratory, after obtaining the consent of the complainant, **Business Administration Manager** notify the laboratory of the information regarding the complaint and request a response.

-In the case of a complaint against VLAC, if necessary, investigate the cause of the complaint with the cooperation of the accreditation committee and other related parties, take appropriate measures, and **Business Administration Manager** report the progress of the complaint response to the complainant.

In the case of a complaint that is not related to the accreditation activity, the content of the complaint will be analyzed, **Business Administration Manager** report the progress of the complaint the response will be discussed with the complainant, and corrective action will be taken.

Implementation details and progress report of complaint handling are notified to the all staff by Business administration.

3.3 The content of the response to the complainant is determined by the department (personnel) that is not the subject of the complaint. We will refer to the initial response of the

laboratory.

3.4 If corrective action is required, follow the corrective action procedure.

3.5 If a complaint is common to all of our accredited laboratories, we will explain and take corrective action for all accredited laboratories.

3.6 Judgment of completion of complaint handling is based on agreement with the complainant.

If reaching an agreement proves difficult, the facts will be objectively organized and recorded, and efforts will be made to reach an agreement—including through Alternative Dispute Resolution procedures—as necessary.

3.7 VLAC are responsible for grievances and decisions.

3.8 Keep a record of complaints. The following items shall be stated in this record.

- Date of receipt of complaint
- Complaint
- Content of complaint
- Grounds for determining that a complaint applies (or reasons for determining that a complaint does not apply)
- Cause of complaint

-Record of the complaint resolution process (communication with the complainant and related parties, investigation of the cause of the complaint, corrective action, [horizontal deployment](#)).

- Details of agreement with the complainant
- Completion date of grievance processing
- Necessary measures in the future (audit, interview, improvement, [preventive measure](#) etc.)

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(Revision History)

Main Text: VR109-2026

3.1 It was decided that the Business Operations Manager would take the lead in handling complaints.

Stipulated that meetings to address complaints are to be held based on the nature of the complaint.

3.2 Specified the person responsible for responding to the complainant. Decided to provide progress reports to the complainant in a fair manner, even for complaints unrelated to accreditation activities.

3.6 Added a procedure for cases where a resolution regarding a complaint is not reached.

3.8 Added provisions for horizontal deployment and prevention of recurrence.

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