**1. Informasi Pengaduan**

**Nama Pelapor :** .............................................
**Alamat :** .............................................
**Nomor Telp/HP:** .............................................
**Email :** .............................................
**Tgl Pengajuan :** .............................................
**Jenis Keluhan:**
☐ Produk
☐ Layanan
☐ Proses
☐ Lainnya: .............................................

**2. Rincian Keluhan**

**Uraian Keluhan:**
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................................................................................................................................................................................
................................................................................................................................................................................

**Tanggal Terjadinya Masalah:**
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**Bukti Pendukung (jika ada):**
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................................................................................................................................................................................

**3. Penerimaan Keluhan**

**Tanggal Diterima:**
.............................................

**Nama Petugas Penerima:**
.............................................

**Tanda Tangan:**

.............................................

**4. Verifikasi dan Investigasi Keluhan**

**Nama Penanggung Jawab Investigasi:**
.............................................

**Tanggal Investigasi:**
.............................................

**Hasil Verifikasi:**
☐ Diterima
☐ Ditolak

**Uraian Hasil Investigasi:**
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................................................................................................................................................................................

**Tindakan Korektif yang Direkomendasikan:**
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................................................................................................................................................................................

**5. Penyelesaian dan Tindakan Korektif**

**Tanggal Tindakan Korektif:**
.............................................

**Penanggung Jawab Tindakan Korektif:**
.............................................

**Uraian Tindakan Korektif yang Diambil:**
................................................................................................................................................................................
................................................................................................................................................................................

**Apakah Keluhan Telah Diselesaikan?**
☐ Ya
☐ Tidak

**6. Komunikasi Hasil kepada Pelapor**

**Nama Petugas yang Menghubungi Pelapor:**
.............................................

**Tanggal Komunikasi Hasil:**
.............................................

**Metode Komunikasi:**
☐ Email
☐ Telepon
☐ Lainnya: .............................................

**Uraian Balasan Pelapor (Jika Ada):**
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................................................................................................................................................................................

**7. Penutupan Keluhan**

**Nama Petugas yang Menutup Keluhan:**
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**Tanggal Penutupan:**
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**Tanda Tangan:**
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