

# **INSURANCE COMPLAINT FORM**



## **CONSUMER PROTECTION INSURANCE - SOUTH AFRICA**

Lewis Stores (Pty) Ltd is registered as a Financial Service Provider (FSP No 2815) and is licensed as a Controlling Company in terms of the Insurance Act.

Monarch Insurance Company Limited is a Licensed Microinsurer

# A. TO SUBMIT A COMPLAINT OR FOLLOW-UP ON A COMPLAINT OR TO PROVIDE US WITH ADITIONAL REQUIRED DOCUMENTATION, YOU CAN CONTACT US IN ANY OF THE FOLOWING WAYS:

- 1. HAND IN AT YOUR NEAREST BRANCH (Branch to use 'Scan to Email', short code #25 Insurance Complaints);
- 2. EMAIL DIRECTLY TO: insurancecomplaints@lewisgroup.co.za; OR
- 3. CONTACT THE INSURANCE CALL CENTER ON 0800 000 598 TO DISCUSS YOUR COMPLAINT.

### PLEASE COMPLETE THE BELOW SECTIONS IN FULL IN ORDER TO AVOID UNNECESSARY DELAYS IN THE REVIEW OF YOUR COMPLAINT

DATE: <u>YYYY / MM / DD</u>

#### B. POLICYHOLDER / COMPLAINANT INFORMATION:

Store Name:	Branch no.:	Account no.:
Customer Name:	Customer's ID. no.:	
Contact cellphone no.:	Alternative contact no.:	
Email address:		

#### C. COMPLAINT PARTICULARS:

1. Please select for which insurance product your complaint relates to:

GOOD COVER	LOSS OF EMPLOYMENT	DISABILITY	DEATH
Х	х	Х	Х

2. What does your complaint relate to:

CLAIMS	COMPLAINTS HANDLING	POLICY (INCL. CHANGES, SWITHCES, CANCELLATION OF POLICY)	PREMIUM CHARGES	ADVICE	OTHER
Х	Х	Х	Х	Х	Х





#### D. FULL REASONS AND DETAILS OF COMPLAINT: (PLEASE INCLUDE ALL RELEVANT DATES):

#### E. HAVE YOU CONTINUED THE DETAILS OF THE COMPLAINT ON A SECOND PAGE?

## F. DETAILS OF ANY OTHER DOCUMENTS ATTACHED: (PLEASE LIST ANY OTHER DOCUMENTS ATTACHED REGARDING THE COMPLAINT.)

#### G. DECLARATION

I, with the above-mentioned particulars and the undersigned do hereby declare that the information contained in this complaints form is true and correct to the best of my knowledge and belief. I expressly consent to Monarch Insurance Company Limited ('MICL') requesting and receiving personal information related to me/the insured, which personal information is, in the opinion of MICL, necessary to assess my insurance complaint and/or claim. I hereby irrevocably indemnify any person which provides MICL with my/the insured's personal information in terms of my aforesaid consent.

Policyholder / Claimant Signature

Branch Manager's Signature D (If complaint was submitted by a Lewis Branch)

Date

YES

NO





#### PLEASE NOTE: (Information for the Customer / Complainant)

- To ensure we provide you, the policyholder / complainant with timely and adequate feedback please complete your contact details.
- If the complaint is lodged with a Lewis branch the form must be completed in duplicate and signed by yourself (the policyholder / complainant) and the Branch Manager.
- You the policyholder / complainant must retain a copy of this form as proof of submitting a complaint.
- Please refer to section A 'Submit a Complaint / Follow-up on a Complaint' at the beginning of the form on how to submit a complaint and/or follow-up on your complaint.

#### WHAT TO EXPECT:

- The insurance complaints department will deal with the complaint as quickly as possible and undertakes to provide you, the policyholder / complainant with the following information in a timely manner:
  - 1. Your complaint reference number,
  - 2. The complaints officer dealing with your complaint, and
  - 3. The escalation process if you are not satisfied with the progress of your complaint.
- We undertake to address your complaint and provide you with the outcome within 14 working days.
- Should you need to contact the Insurance Call Center, call 0800 000 598 and ask for the Complaints Officer. (Please ensure that your policy number or your I.D. number are on all correspondence submitted regarding the complaint)
- If the matter is not resolved to your satisfaction, you may lodge your complaint with either of the following ombuds' offices:

#### The National Financial Ombud Scheme:

Telephone number: 0860-800-900 Email address: info@nfosa.co.za Website address: <u>www.nfosa.co.za</u>

NFO Cape Town Office Claremont Central Building 6th Floor 6 Vineyard Road, Claremont Western Province 7700 NFO Johannesburg Office 110 Oxford Rd Houghton Estate Johannesburg Gauteng 2198

#### The FAIS Ombudsman:

Telephone:	(012) 470-9080
Share-call:	0860 663 247
Email:	info@faisombud.co.za
Website:	www.faisombud.co.za

The FAIS Ombud deals with complaints submitted to the Office by a specific client against the FSP. Refer to the website as noted above for more details.