

ANNEXURE A

CLIENT COMPLAINT SUBMISSION FORM

Client Name & Surname		
Client Contact number		
Client Email address		
Client ID number		
Product Supplier name if applicable		
Adviser (if applicable)		
Name of Complainant		
Date complaint submitted		
Complainant Contact number		
Preferred method of communication		
The FSP	t which an expression of dissatisfaction is being made	
☐ The FSP's service supplier		
Both the FSP and its service		
The FSP's Juristic Represen	itative (JR)	
Indicate one or more of the fo	ollowing reasons for the dissatisfaction	
If "None of the above" is appli	icable, the complainant may not have grounds for a valid com	nplaint
	e supplier has contravened or failed to comply with an agreer	ment, a
	ict which is binding on the FSP or supplier	6.11
	e supplier's maladministration or willful or negligent action or arm, prejudice, distress or substantial inconvenience	r failure to
	e supplier has treated the person unfairly	
None of the above	supplier has treated the person diffallity	

MEETING YOUR **FINANCIAL**

Unit 1, Village Corner, 57 via Latina Crescent, Irene Corporate Corner, Irene, South Africa PO Box 61803, Pierre Van Ryneveld, Centurion, Gauteng, 0045 Company Reg: 1999/008361/07 Director: Mark Weetman External Compliance: Mrs Shashika Adsetts, Moonstone Compliance, CO 6220



+27 (0)11 384 2900



info@unum.co.za







compla	ou timeously and comprehensively informed of the process to be followed in handling lint, including contact details, prescribed timelines, internal review and escalation rou schemes available, as well as the duties of the FSP and the rights of the complainant	tes,
∐Yes	□No	
PLEASE	E EXPRESS THE REASONS FOR YOUR DISSATISFACTION IN AS MUCH DETAIL AS POS	SIBLE
PLEASE	E INDICATE YOUR DESIRED OUTCOME AND WHAT YOU WOULD LIKE TO ACHIEVE	
PLEASE	E PROVIDE AND LIST THE SUPPORTING DOCUMENTATION THAT YOU BELIEVE WOU	LD

ASSIST US IN RESOLVING YOUR COMPLAINT





