

COMPLAINT FORM

1. POLICYHOLDER'S DETAILS

Name : _____ Contact No: _____
 Address : _____

 I/C No : _____

2. COMPLAINANT'S DETAILS (if different from the above)

Name : _____ Contact No: _____
 Address : _____

 Relationship with Policyholder: _____
 I/C No : _____

3. MODE OF COMPLAINT

Letter / Fax Email Walk in Phone Others (Specify) _____

4. DETAILS OF INSURANCE POLICY

Policy No : _____
 Claim No : _____ Total claim, if applicable: _____

Please tick () type of insurance policy:-

Motor Fire Burglary Marine Cargo
 Life Annuity Medical & Health Personal Accident

Others please state: - _____

5. TYPE OF COMPLAINT

Claims	Underwriting	Marketing & Sale
<input type="checkbox"/> Delay	<input type="checkbox"/> Non-renewal <input type="checkbox"/> Critical year	<input type="checkbox"/> Agent's Services
<input type="checkbox"/> Unsatisfactory offer	<input type="checkbox"/> Delay in policy issuance	<input type="checkbox"/> Pressure selling techniques
<input type="checkbox"/> Repudiation	<input type="checkbox"/> Surrender values & Policy bonuses	<input type="checkbox"/> Misleading Illustrations & brochures
	<input type="checkbox"/> Policy cancellation/ Premium refunds	

Others, please specify: _____

6. HAS THIS PROBLEM BEEN PREVIOUSLY REPORTED? YES NO

If YES, please indicate:-

Date(s):- _____ Person spoken to: _____

7. **BRIEF DESCRIPTION OF THE COMPLAINT (including relevant dates.)**

(Attach a separate sheet if needed, copies of any correspondence or other documents which may be of assistance, including any letter(s) that may have been sent to or received from Company. Please find attached the letter, for further information.)

Signature of the Person Who Completing the Form:-
(Complainant or Staff)

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Name: _____

Date: _____

FOR OFFICE USE:

Officer Receiving Complaint		Date Received	
Department		Initial / Signature	
Forward to Complaint Unit (Date)		Initial / Signature by Complaint Officer	
REMARKS			

IMPORTANT

Completed Complaint Form should be submitted immediately to Complaint Officer and not later than 2 hours after receipt of complaint. Timeline for submission should be strictly observed, as acknowledgement letter to Complainant must be sent out within 2 days after the complaint date.