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# Customer Complaint Registration Form

As a valued customer your thoughts and views are very important to us. Please complete this form and send it to us.

## 1. Your Details

First name ..... Surname .....

Address .....

Home phone ..... Work phone .....

Mobile phone ..... Email .....

## 2. Your Complaint

Policy number ..... Claim number .....

When did the event you are complaining about happen? .....

What is your complaint? (Please provide copies of all relevant documentation and correspondence)

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What do you want us to do to resolve the matter?

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Signature X ..... Date .....

Signature X ..... Date .....

We will acknowledge your complaint within 24 hours of receipt and make sure it's fully investigated. You'll receive written advice of the outcome within 7 working days, or if no decision has been made, we'll give you an update on the progress of your case. Finally, if we are unable to resolve your complaint within two months we'll let you know.

We are a participant of the Insurance & Financial Services Ombudsman Scheme (IFSO Scheme). The IFSO Scheme resolves complaints about insurance and financial services. This is an independent scheme that's free of charge to you.

If you wish to have your complaint considered by them, please contact the Insurance & Financial Services Ombudsman office no later than three months after we informed you that deadlock has been reached with your claim. You can contact the Insurance & Financial Services Ombudsman by phoning 0800 888 202 or (04) 499 7612, by fax at (04) 499 7614 or by writing to PO Box 10-845, Wellington 6143. You'll find additional information and contact details at www.ifso.nz.