



Established in terms of Section 74 of the Financial Service Regulatory Authority Act 2010

FOR OFFICE USE ONLY

DATE RECEIVED		TIME RECEIVED	
RECEIVED BY			
OUR REFERENCE			

COMPLAINT FORM

Note: Kindly read through the form and consider Section 4 before lodging your complaint.

SECTION 1

Tell us about yourself:

Surname:		Title:	
First Name(s):			
Occupation (if retired, previous occupation):			
D.O.B./Identity Number:		SEX(F/M):	
Postal or Physical address to which we may send your letters:			
Telephone daytime:		Cell:	

Details of anyone complaining with you or who might have an interest in the matter:

Surname:		Title:	
First Name(s):			
Occupation (if retired, previous occupation):			
Identity Number:			
Postal or Physical address to which we may send your letter:			
Telephone daytime:		Cell:	
Fax:		E-mail:	

SECTION 2

Details of the person against whom you are complaining:

Name of person or service provider:		
Their address:	Postal:	Physical:

Phone:		Fax:	
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Your policy/membership/loan account/client number:

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Where applicable, give us details of who you dealt with when you were buying the product or that you dealt with pertaining to the matter:

Name of person or service provider:

Their address:

Postal:		Physical:	
Phone:		Fax:	

**SUPPORTING DOCUMENTS ATTACHED:
(PLEASE TICK THE APPROPRIATE BOX)**

		YES	NO
GENERAL	COPY OF CONTRACT / PAYMENT AGREEMENT		
	BENEFIT STATEMENT / PAY SLIP		
	CORRESPONDENCE / LETTERS		
MEDICAL / DISABILITY	COPY OF DISABILITY FINDING / REPORT		
DEATH BENEFIT	COPY OF BIRTH AND DEATH CERTIFICATE		
ANY OTHER DOCUMENTS	(PLEASE ATTACH THOSE THAT ARE RELEVANT TO THE CASE)		

NOTE:

- (i) IF THE SUBJECT MATTER OF YOUR COMPLAINT IS PENDING BEFORE A COURT OF LAW OR ANY OTHER FORUM, PLEASE BE ADVISED THAT THE OFS CANNOT LOOK AT IT.
- (ii) PLEASE ENSURE THAT YOU ANSWER ALL THE QUESTIONS CORRECTLY.
- (iii) IF YOU HAVE NOT COMPLAINED TO THE PERSON OR SERVICE PROVIDER THE OMBUDSMAN HAS A DISCRETION TO REQUEST THAT YOU DO SO PRIOR TO LODGING A COMPLAINT WITH THE OFS.
(you will be required to provide proof that you have complained to the person or service provider)

SECTION 3

Please tell us in a few words a brief background of your complaint, indicating the date month/ or year/period in which your grievance occurred or when you became aware of your grievance/complaint.

What are you unhappy about (State clearly in precise relevant terms)

How would you like your complaint to be resolved? (Outcome expected)

SECTION 4

Your permission for us to go ahead:

I would like the OFS to investigate my complaint and therefore confirm that:-

1. My matter is not pending at a court of law or any other forum.
2. I understand that the Ombudsman or his/her staff may:
handle complaints in a different way from the court (by phone, letter and email);
need to exchange information about my complaint with other organisations (for example to find out important information about my case);
publish examples of where things can go wrong, based on real cases but will always respect my privacy and keep my personal information confidential.
3. I undertake not to share personal or confidential information with members of the public that was submitted by other parties to my complaint during investigation.

Signature: _____ Date: _____

COMPLAINANT

THUS SWORN/ AFFIRMED TO BEFORE ME AT _____ ON THIS
THE _____ DAY OF _____ 20____. THE DEPONENT HAVING
ACKNOWLEDGED THE CONTENTS HEREIN.

DEPONENT

COMMISSIONER OF OATHS

FULL NAME:

DESIGNATION: