

# COMPLAINTS MANAGEMENT POLICY

AUTHORISED FINANCIAL SERVICE PROVIDER  
FSP NO: 12628

## OUR COMMITMENT

Our complaints resolution procedures have been designed to show our commitment to the prompt handling of complaints in an effective, fair, and efficient manner and in strict accordance with the provisions of the FAIS Act and any other South African laws as may be applicable with a view to continuously improve our clients' experience with us.

Client priority and satisfaction is a core principle of Guarantee Placings (Pty) Ltd. We value the support of our clients and place strong emphasis on maintaining a long-term relationship that is open, honest, transparent and based on trust.

In view of this, we have established an internal complaint's resolution procedure for the handling of complaints which also aim to set standards and guide aggrieved clients.

## 1.1 INTERNAL COMPLAINTS RESOLUTION PROCESS

Should you wish to lodge a complaint, you may:

1. Contact your initial contact person telephonically or via e-mail
2. Contact us telephonically on 011 789 6870
3. Send an e-mail to [info@gteeplace.co.za](mailto:info@gteeplace.co.za)
4. Submit feedback via our website: [https://www.Guarantee Placings.co.za](https://www.GuaranteePlacings.co.za), go to Contact us

Please provide all relevant information to enable us to assist you efficiently, including:

- a) Policy holder name
- b) Your contact details
- c) All details, dates and necessary supporting documentation

The person dealing with your complaint will:

- i) Acknowledge receipt of the complaint within 1 working day
- ii) Confirm their contact details to you
- iii) Identify all issues and advise you of additional information required if necessary
- iv) Confirm by when we will provide you with feedback
- v) Provide an outcome to the complaints within 15 working days, provided we have all required information

- vi) In the unlikely event that the person handling the complaint finds it impossible to reach agreement, the matter will be escalated internally for a dispute resolution process.

If you dispute the outcome of a rejected claim, the process set out under section 1.2 will be followed.

### 1.2 INTERNAL ESCALATION PROCESS

If your complaint has not been resolved to your satisfaction, or if you dispute the outcome of your claim, you may follow our internal escalation process by sending the relevant details to [info@gteeplace.co.za](mailto:info@gteeplace.co.za)

Upon receipt of your dispute/internal escalation:

1. The internal dispute resolution process will follow the standards set out under the normal complaints resolution process as set out in 1.1 above.
2. Once a decision has been made with regards to your dispute, we will confirm to you in writing:
  - i) Reason for the decision
  - ii) Facts on which the decision was based
  - iii) Inform you of the external dispute resolution mechanisms available, as well as the timeframes within which you need to lodge any external dispute.
  - iv) On request provide you with copies of all documents and information from third parties that influenced the decision, provided it is not subject to legal privilege

### 1.3 EXTERNAL DISPUTE PROCESS

If you are not satisfied with the internal resolution of your complaint/dispute, you may approach certain external parties like:

- a) The Ombudsman for Short-term Insurance
- b) The Ombudsman for Long-term Insurance
- c) The Financial Advisory and Intermediary Services (FAIS) Ombudsman, if your dispute relates to advice received;
- d) The South African Insurance Association (SAIA), if you feel that a breach of their code of conduct has occurred.

## CONTACT NUMBERS

### NON-LIFE INSURANCE OMBUDSMAN

The OSTI is available to advise you in the event of a complaint regarding intermediary service and advise.

Name: The Ombudsman for Non-Life Insurance  
Physical Address: 1 Sturdee Avenue, 1<sup>st</sup> Floor, Block A, Rosebank, Johannesburg, 2196  
Postal Address: P O Box 32334, Braamfontein, 2017  
Email: [info@osti.co.za](mailto:info@osti.co.za)  
Telephone: (011) 726 8900  
Fax: (011) 726 5501  
Share call: 0860 726 890  
Web site: [www.osti.co.za](http://www.osti.co.za)

### FAIS OMBUDSMAN

Physical Address: 125 Dallas Avenue, Menlyn Central, Waterkloof Glen, Pretoria, 0010  
Postal Address: P O Box 74571, Lynnwood Ridge, 0040  
Telephone number: (012) 762 5000/ (012) 470 9080  
Fax: 086 764 1422 / (012) 348 3447  
Email: [info@faisombud.co.za](mailto:info@faisombud.co.za)  
Website: [www.faisombud.co.za](http://www.faisombud.co.za)

### NON-LIFE INSURANCE/FINANCIAL SECTOR CONDUCT AUTHORITY

Name: Financial Sector Conduct Authority (FSCA)  
Postal Address: P O BOX 35655, Menlo Park, 0102  
Telephone: (012) 428 8000  
Fax: (012) 346 6941  
Contact centre: 0800 20 37 22  
E-mail: [info@fsca.co.za](mailto:info@fsca.co.za)  
Website: [www.fsca.co.za](http://www.fsca.co.za)

## DEFINITION OF COMPLAINT

In terms of the FAIS Act a complaint means specific complaint relating to a financial service rendered to the client on or after the date of commencement of the FAIS Act, alleging that Guarantee Placings (Pty) Ltd:

Has contravened or failed to comply with a provision of the FAIS Act and that, as a result, the client has suffered or is likely to suffer financial prejudice or damage.

Has willfully or negligently rendered a financial service to the client which has caused prejudice or damage to the client, or which is likely to result in such prejudice or damage or has treated the client unfairly.

It is important to note that in terms of the FAIS Act, the client need not have already suffered a financial loss or incurred damages before a complaint may arise but need simply be a possible consequence of the financial service rendered by Guarantee Placings (Pty) Ltd.

## DEFINITIONS:

Customer – Means a person who has applied to or otherwise approached Guarantee Placings (Pty) Ltd in relation to becoming a customer, or a person who has been solicited by Guarantee Placings (Pty) Ltd to become a customer or has received marketing material or advertisement material in relation to Guarantee Placings (Pty) Ltd's products or services.

Service Provider- Service provider means any person (whether or not that person is the agent of the insurer) with whom an insurer has an arrangement relating to the marketing, distribution, administration or provision of policies or related services.

Complainant – means a person who submits a complaint and includes a –

- A) Policyholder or policyholder's successor in title
- B) Beneficiary of the beneficiary's successor in title, or
- C) Potential policyholder or member whose dissatisfaction relates to the relevant application, approach, solicitation or advertising or marketing material, who has direct interest in the agreement, policy or service to which the complaint relates, or a person acting on behalf of a person referred to in a, b or c.

Complaint – means an expression of dissatisfaction by a person to an insurer or, to the knowledge of the insurer, to the insurer's service provider relating to a policy or service provided or offered by that insurer which indicates, regardless of whether such an expression of dissatisfaction is submitted together with or in relation to a policyholder query, that –

- i) The insurer or its service provider has contravened or failed to comply with an agreement, a law, a rule, or a code of conduct which is binding on the insurer or to which it subscribes
- ii) The insurer or its service provider's maladministration or willful or negligent action or failure to act, has caused the person harm, prejudice, distress, or substantial inconvenience; or
- iii) The insurer or its service provider has treated the person unfairly.

Compensation payment – means a payment by an insurer, whether in monetary form or in the form of a benefit or service, by or on behalf of an insurer to a complainant to compensate the complainant for a proven or estimated financial loss incurred as a result of the insurer's contravention, non-compliance, action, failures to act, or unfair treatment forming the basis of the complaint, where the insurer accepts liability for having caused the loss concerned, but excludes any –

- a) goodwill payment
- b) payment contractually due to the complainant in terms of a policy; or
- c) refund of an amount paid by or on behalf of the complainant to the insurer where such payment was not contractually due

goodwill payment – means a payment by an insurer to a complainant as an expression of goodwill aimed at resolving a complaint, where the insurer does not accept liability for any financial loss to the complainant as a result of the matter complained about

rejected – in relation to a complaint means that a complaint has not been upheld and the insurer regards the complaint as finalized after advising the complainant that it does not intend to take any further action to resolve the complaint and includes complaints regarded by the insurer as unjustified or invalid, or where the complainant does not accept or respond to the insurer's proposals to resolve the complaint.

reportable complaint – means any complaint other than a complaint that has been –

- a) upheld immediately by the person who initially received the complaint
- b) upheld within the insurer's ordinary processes for handling policyholder queries in relation to the type of policy or service complained about, provided that such process does not take more than five business days to complete from the date the complaint is received: or
- c) submitted to or brought to the attention of the insurer in such a manner that the insurer does not have a reasonable opportunity to record such details of the complaint as may be prescribed in relation to reportable complaints.

upheld – means that a complaint has been finalized wholly or partially in favor of the complaint and that –

- i) the complainant has explicitly accepted that the matter is fully resolved; or
- ii) it is reasonable for the insurer to assume that the complainant has so accepted; and
- iii) all undertakings made by the insurer to resolve the complaint have been met or the complainant has explicitly indicated its satisfaction with any arrangements to ensure such undertakings will be met by the insurer within a time acceptable to the complainant.