**Effective Date:**

**Amendment Date:**

**Purpose of the Policy**

The purpose of your complaint handling policy is to implement a free, impartial and fair handling of customer complaints within a reasonable time from its receipt. More specifically the complaint handling policy describes **our/my** process for monitoring receipts of customer complaints, oversight of acknowledgements of receipt sent out to customers, the creation of a complaint file, and the possibilities to resort to a third party, if necessary, should a customer remain dissatisfied after day-to-day operational steps towards resolution have been applied.

**Definition of Complaint**

For the purposes of this policy, a complaint is any oral or written expression of dissatisfaction by a customer that is not resolved and is escalated to the **(Name of person in charge).**

Informal steps to correct a specific problem are not considered a complaint, provided the problem is resolved as part of the registrant’s/advisor’s normal activities and the consumer has not filed a complaint.

**Person(s) in Charge**

**(Name)** is responsible for applying the policy and would act as the respondent with the customer, regulator, insurer, or other third parties deemed necessary, and needs to be clearly identifiable to clients who are filing a complaint.

This person is in charge of sending an acknowledgement of receipt to the customer, training staff and providing them with the necessary information to comply with the complaint handling policy.

**Receipt of the Complaint**

Customers who wish to file a complaint must do so in writing to our office.

Agency/Agent Name:

Address:

Telephone Number:

Fax Number:

Email Address:

Any employee that receives a complaint must immediately forward it to **(name)** in charge of this policy.

**Process for resolving complaints**

* Speak with the customer and/or other individual(s) to determine the nature of the complaint.
* Maintain a complaint log, at a minimum, it should include the following:
  + Customer name
  + Policy or document number
  + Advisor Name
  + Date of Complaint, (Written or verbal)
  + Receipt of complaint
  + Individual handling the complaint
  + Summary of complaint
  + If and when the complaint was reported to the insurer and/or MGA and the contact information
  + Steps towards resolution
  + Statement of resolution, and
  + Date of resolution
* Respond quickly and professionally
* Acknowledge receipt of the complaint within **(X)** days and keep a copy of the initial response for the complaint log.
* Document the chain of events leading to the complaint and keep copies in the clients file
* If the complaint regards service, make efforts to resolve it.
* Notify your MGA and/or the insurer and identify the steps you are taking.  At this point, the MGA or insurers may want to take charge of the complaint.
* Ensure that the customer receives a written letter of acknowledgement from either your office, the MGA or insurer, depending on who has carriage of the complaint.

|  |  |  |
| --- | --- | --- |
| **Complaint log** | | |
| Recipient of complaint | |  |
| Date complaint was received | |  |
| Name of complainant | |  |
| Complainant’s address | |  |
| Complainant’s telephone | |  |
| Complainant’s email | |  |
| Advisor’s name | |  |
| Policy number | |  |
| Date acknowledgment was sent | |  |
| If the complaint pertains to advisor conduct, date E&O carrier was notified | |  |
| Date reported to the insurer and/or MGA | |  |
| Contact info. for the insurer and/or MGA | |  |
| Summary of Complaint: | | |
| Steps towards resolution: | | |
| Statement of resolution: | | |
| Resolution Date: |  | |