

Tracker Financial Services - Complaints Resolution policy

Version 5 – August 2021

1. Overview

Customer satisfaction and Treating Customers fairly are an integral part of the Tracker Financial Services' (herein after referred to as "TFSP") culture and we appreciate it when our clients bring their concerns to our attention. In doing so it doesn't only allow us to correct the matters, but most importantly, it allows us to continuously improve the Service Excellence that we strive to provide to our valued clients.

This policy will be used by our employees to ensure that every complaint is dealt with the necessary professionalism.

The purpose of this policy is to:

- Ensure that the effective, fair and speedy resolution of all complaints are properly administered and controlled within TFSP.
- Ensure that TFSP complies with the Short-term Insurance Act, Financial Advisory and Intermediary Services Act (FAIS Act) and/or the Policy Holder Protection Rules (PPR), TCF Complaints Handling framework and any other applicable legislation.

2. Definitions:

2.1 Complaint

It is an expression of dissatisfaction to an insurer / their service provider (to the knowledge of the insurer) relating to a policy or service which indicates / alleges, that -

- The insurer or their service provider failed to comply with an agreement, a law, a rule, or a code of conduct;
- The insurer or their service provider's maladministration or wilful /negligent action or omission, caused the person harm, prejudice, distress or substantial inconvenience;
- the insurer or its service provider has treated the person unfairly;
- regardless whether submitted together with or in relation to a policyholder query.

2.2 Complainant

It is a person/ someone acting on their behalf, who has a direct interest in the agreement, policy or service, and includes a –

- a policyholder or their successor in title;
- a beneficiary or their successor in title;
- a person whose life is insured under a policy;
- a person that pays a premium;

- a member of a group scheme and/or a potential policyholder or potential member of a group scheme - whose dissatisfaction relates to the relevant application, approach, solicitation, advertising or marketing material.

2.3 Upheld:

This means that a complaint has been finalised wholly or partially in favour of the complainant and –

- the complainant has explicitly accepted that the matter is fully resolved; or
- it is reasonable for the insurer to assume that the complainant has so accepted; and
- all undertakings made by the insurer to resolve the complaint have been met or the complainant has explicitly indicated its satisfaction with any arrangements.

3. Objectives

The Complaints Management Framework formalises the practices required for effective management and handling of customer complaints in order to:

- Be transparent and to ensure that our clients have full knowledge of the procedures to have their complaints resolved and staying updated on the progress;
- Ensure fair outcomes for customers;
- Protect and enhance TFS reputation;
- allow for effective reporting, detailed analysis and identification of trends related to complaints;
- achieve effective and timely resolution of complaints in respect of acceptable turn-around times;
- provide guidelines for acknowledging complaints (and complainant communication) and for
- recording customer complaints in a centralised manner;
- improve organisational effectiveness through learning from client feedback and root cause
- analysis;
- ensure effective management of complaints, in line with this framework;
- ensure objectivity by the complaints handling staff in attending to and resolving a complaint;

4. Responsibilities relating to the complaints procedure

4.1 Policy holder responsibilities:

- Please inform us of your complaint as soon as reasonably possible.
- You may contact us telephonically as all our conversations are recorded or in writing.
- Provide us with all relevant information relating to your complaint to assist us to deal with your complaint timeously.

- If your complaint is FAIS related, note that it MUST be in writing. Please refer to page 4 for the requirements in respect of complaints as per the Financial Advisory & Intermediary Services Act.

4.2 TFSP responsibilities:

- Acknowledge the receipt of your complaint within 48 hours and may request further information, if required.
- We aim to provide our formal feedback to you within 14 days. All complaints received need to be thoroughly reviewed and therefore if the 14 days are not sufficient for us to do so we will provide feedback to you at daily afterwards.
- Take steps to investigate and keep you informed of the progress.
- In the unlikely event that we may be experiencing internet problems, we kindly request that if you have not received our acknowledgment, within 5 days, after you submitted your complaint, that you kindly contact us on 0860 60 50 40 and request to speak to our the Tracker Financial Services complaints department to advise us accordingly.
- TFS will ensure that customers who are financially prejudiced as a result of our contravention, non-compliance, action, failure to act, or unfair treatment are fairly compensated.
- TFS will maintain the confidentiality of customers' personal information and comply with the relevant legislation to ensure that internal controls are in place for safeguarding of data
- All complaints will be investigated and resolved in a fair and professional manner and feedback provided to you within 14 days of the date of receipt of your initial complaint – provided that we received all information required and/or an investigation has been completed.
- We will, in cases where further information, assessment or investigation is required, agree with you on a timeframe not exceeding 42 days of receipt of the complaint.
- Records of complaints maintained for a period of 5 years.
- Where your complaint is upheld, we will ensure that a full and appropriate level of corrective action is offered to you without delay.
- Where your complaint is rejected, then we will provide you with clear and adequate reasons for the decision and inform you of your rights in this regard, as well as provide you with the details of external dispute resolution entities that can be utilised by you.
- All complaints will be accurately, efficiently and securely recorded.
- We will use the recorded complaints information to identify trends and for training purposes - to avoid similar future complaints.
- We ensure that all staff dealing with complaints are adequately trained and have an appropriate mix of experience, knowledge and skills in complaints handling and TCF.
- Training is provided on: How to effectively deal with complaints, the timelines involved and recordkeeping requirements.
- The trends that are identified from past complaints are utilized to identify training needs for future product specific training, refreshers and coaching sessions.

5. How to complain:

Level 1

- You can contact TFSP on **0860 60 50 40**.
- You can complete the online form on our webpage www.tracker.co.za
- An email can be sent to: TFSP@tracker.co.za
- Alternatively a fax can be sent to **011 215 8900**

Level 2:

- **Details of Our compliance officer: Askari Compliance:**
Email: tfs@askaricompliance.com
Fax : **086 633 1472**
- **Our Insurer: Guardrisk Insurance Company Limited**
Tel: **011 669 1000**
Fax: **012 675 3826**
Email: complaints@guardrisk.co.za

Should you not be entirely satisfied with the outcome of our resolution, please direct your complaint and any supporting documentation to the following parties:

Level 3:

Should you not be satisfied you may re-direct your complaint and all supporting documents to the following parties, in writing, within a 6 months period of receipt of such feedback from TFSP.

(A form attached for your perusal)

- **The Short Term Insurance Ombudsman:**
Telephone: **(011) 726 – 8900**
Fax: **(011) 726 5501**
Website: www.osti.co.za

The Ombudsman's task is to act as a "mediator" or informal arbitrator and he/she does not represent either of the parties to the dispute. Important points to remember:

- We encourage you to complain to insurance company first and only if you are unable to resolve the dispute with your insurer, then you can refer the matter to the Ombudsman's Office
- The Ombudsman's decisions are binding on the insurance company but not on you. The Ombudsman's Office is an independent office.
- The Ombudsman's decisions can be based on law and equity
- The Ombudsman's Office does not give legal advice
- The service is free to insured consumers

- The Short Term Insurance Ombud offers consumers a “no risk” mechanism to resolve disputes with insurers. The office can assist consumers with certain personal lines short term insurance as well as with limited commercial insurance matters.
- Refer to the website as noted above for more details.

- **The FAIS Ombudsman:**

Telephone: (012) 470-9080
Fax: (012) 348-3447
Website: www.faisombud.co.za

The FAIS Ombud deals with complaints submitted to the Office by a specific client against a financial services provider.

“Complaint” means a specific complaint relating to a financial service rendered by a financial services provider or a representative of such provider to the complainant.

The complaint will be considered if it is alleged that the provider or representative:

- Has contravened or failed to comply with a provision of the FAIS Act and that as a result thereof the complainant has suffered or is likely to suffer financial prejudice or damage;
- Has wilfully or negligently rendered a financial service to the complainant and has caused prejudice or damage to the complainant or which is likely to result in such prejudice or damage; or
- Has treated the complainant unfairly;
- The act of omission complained about must have occurred on or after 30 September 2004.
- Before submitting a complaint to the Office, the complainant must endeavour to resolve the complaint with the responding party. The responding party has six weeks in which to resolve the complaint with the complainant.
- After receipt of the final response of the responding party, the complainant has six months within which to submit a complaint to the FAIS Ombud.
- Refer to the website as noted above for more details.

- **The Registrar of Short Term Insurance:**

Telephone: (012) 428-8000
Fax: (012) 346 -6941
Website: www.fsca.co.za

The Registrar’s duties are wide ranging and must ensure that Insurers comply with the following, however not limited to:

- Submission of statements and accounts;
- Statement of liabilities;
- Statement of assets;
- Solvency margin regulation;
- Separation of assets;
- Commission rates for intermediaries;
- Refer to the website as noted above for more details.

6. **Complaints Procedure:**

- We will acknowledge the receipt of your complaint within 48 hours and may request further information, if required.
- We will provide our formal feedback to you within 14 days. All complaints received need to be thoroughly reviewed and therefore if the 14 days are not sufficient for us to do so we will provide feedback to you at daily afterwards.
- We will take steps to investigate and keep you informed of the progress.
- In the unlikely event that we may be experiencing internet problems, we kindly request that if you have not received our acknowledgment, within 5 days, after you submitted your complaint, that you kindly contact us on 0860 60 50 40 and request to speak to our the Tracker Financial Services complaints department to advise us accordingly.
- We will investigate all complaints and resolve it in a fair and professional manner and f provide feedback to you within 14 days of the date of receipt of your initial complaint – provided that we received all information required and/or an investigation has been completed.
- We will, in cases where further information, assessment or investigation is required, agree with you on a timeframe not exceeding 42 days of receipt of the complaint.
- Where your complaint is resolved in your favour, we will ensure that a full and appropriate level of corrective action is offered to you without delay.
- Where your complaint is not resolved in your favour, then we will inform you of your rights in this regard, as well as provide you with the details of external dispute resolution entities that can be utilised by you.
- TFSP will maintain records of all complaints for a period of 5 years.
- We will use this information to identify trends, to improve processes and for training purposes - to avoid similar future complaints.

