



PSG Wealth Holdings (Pty) Ltd

Complaints Resolution Policy





Contents

1. Preamble	3
2. Purpose of this policy	3
3. Our commitment	3
4. Definition of complaint	4
5. Complaints procedure	5
6. Other options available to complainant	6
Annexure A – Complaints Resolution Framework: PSG Life Ltd	8
Annexure B - Complaints Resolution Procedure: Stockbroking	14
Annexure C – Rules on Proceedings of the office of the Ombudsman for Financial Service Providers	15
Annexure D – Procedure for lodging a complaint with the Ombudsman for Long-term Insurance	17
Annexure E- Procedure for lodging a complaint with the Pension Fund Adjudicator	19



1. Preamble

- 1.1. PSG Wealth Holdings (Pty) Ltd (hereinafter referred to as PSG Wealth Holdings) is wholly owned by the PSG Konsult Group. PSG Wealth Holdings consists of the wholly owned subsidiaries, PSG Life Limited ("PSG Life"), PSG Invest (Pty) Ltd (PSG Invest"), PSG Multi Management (Pty) Ltd ("PSG MM") and PSG Securities Ltd ("PSG Securities") (collectively hereinafter referred to as "subsidiaries"). Included in the reference to subsidiaries are PSG Fixed Income and Commodities (Pty) Ltd and PSG Scriptfin (Pty) Ltd, wholly owned subsidiaries of PSG Securities Ltd. The subsidiaries operate under the PSG Wealth Holdings sub-group and market/distribute relevant products under the PSG Wealth brand.
- 1.2. The Long-term Insurance Policy Protection Rules requires Long-term Insurers to have their own, separate complaints resolution policy. The PSG Life Complaints Resolution Framework (attached as Annexure A) should therefore be followed first where complaints relate to Insurance products. Where there are any inconsistencies between the two policies the PSG Life Complaints Resolution Policy prevail.
- 1.3. The JSE requires PSG Securities Ltd to follow a more stringent complaints resolution process. The Complaints Resolution Procedure: Stockbroking (attached as Annexure B) should therefore be followed first. Where there are any inconsistencies between the two documents the JSE Complaints Resolution Procedure will have preference.
- 1.4. Reference to PSG or FSP will include all entities listed in par 1.1 except if it is indicated otherwise.

2. Purpose of this policy

- 2.1. The purpose of this policy is to formally document PSG's commitment to establishing and maintaining a Complaints Policy and procedures for the effective internal resolution of complaints. Clients will therefore be enabled to address their complaints in a formal and constructive manner which contributes to a better outcome in terms of the TCF principles.
- 2.2. This document has been prepared in accordance with the FAIS Act and the subordinate legislation thereto as well as the ASISA Standard on complaints resolution.

3. Our commitment

PSG is committed to:

- 3.1. Addressing and resolving any complaints received from clients in a timely and fair manner and in strict accordance with the provisions of the FAIS Act and any other South African law as may be applicable;
- 3.2. Applying the basic values of transparency and visibility will ensure that clients have full knowledge of the procedures established for internal resolution of their complaints, details of which will be given to them in writing;
- 3.3. Ensuring easy access to our complaints resolution facilities at any of our offices, or by way of post, telephone or email;



- 3.4. Employing and empowering properly trained people in our business to deal with complaints, as well as with the escalation of serious non-routine complaints;
- 3.5. Dealing with complaints in a timely and fair manner, with each complaint receiving proper consideration in a process that is managed appropriately and effectively;
- 3.6. Offering full and appropriate redress in all cases where a complaint is resolved in favour of a client;
- 3.7. Informing clients of their right to refer their complaints to the Ombud should a complaint not be resolved to their satisfaction within six weeks from the date on which the complaint is received by PSG;
- 3.8. Maintaining records of all complaints received for a period of 5 years, which will specify whether complaints were resolved or not;
- 3.9. Implementing follow-up procedures to:
 - 3.9.1. Ensure the avoidance of occurrences giving rise to complaints;
 - 3.9.2. Identify and act on any trends coming out of complaints, customer surveys and feedback from the Ombud schemes; and
 - 3.9.3. Improve services and complaint systems and procedures where necessary.

4. Definition of complaint

In terms of the FAIS Act a complaint means a specific complaint relating to a financial service rendered to the client on or after the date of commencement of the FAIS Act, alleging that PSG:

- 4.1. 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;
- 4.2. Has wilfully 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
- 4.3. 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 PSG. Complaints will not be limited to only FAIS related complaints but will include all complaints of any nature received by PSG.



5. Complaints procedure

5.1. Steps to follow when lodging a complaint:

- 5.1.1. If you have a financial planner, contact your specific branch where your financial planner is operating from (this information is available on your latest policy schedule or appointment document);
- 5.1.2. If your complaint is not resolved by the branch you may escalate your complaint to the relevant Regional Manager;
- 5.1.3. If you are still unhappy with the outcome of your complaint or if you don't have a financial planner, you can lodge your complaint in writing directly to the PSG Wealth Complaints Officer, by addressing the complaint via email at Wealth.Escalations@psg.co.za;
- 5.1.4. All complaints must be in **writing**. A copy of this Complaints Resolution Policy will be sent to you on receipt of the initial complaint;
- 5.1.5. The complaint must have the following information:
 - your personal and contact details
 - details of the complaint; and
 - any relevant documents.

5.2. Allocation to responsible person

- 5.2.1. Your complaint will be acknowledged, in writing, by PSG within 3 business days. In addition to this you will be provided with the name and contact details of the PSG staff member responsible for the resolution of your complaint.
- 5.2.2. Your complaint will be categorised, and the date and contents of the complaint will be logged in the official Compliance Complaints Register.
- 5.2.3. PSG will endeavour to resolve your complaint in a timely manner. The PSG staff member responsible for the resolution of your complaint will provide you with updates and feedback.
- 5.2.4. Attempts will be made to resolve the dispute in a fair and effective manner, giving proper consideration to the complaint, within 6 weeks of receiving the complaint.

5.3. Escalation of complaint to Senior Management

- 5.3.1. If the PSG staff member has failed or is unable to resolve the complaint within a reasonable time, the matter will be escalated to senior management or a Designated Handling Function (DHF) whose members have decision-making power to resolve a complaint.



5.4. Escalation to Compliance Officer

5.4.1. If the matter remains unresolved after senior management escalation the complaint will automatically be escalated to the Compliance Officer of the FSP who will attempt to solve the complaint with the assistance of persons with the necessary authority and expertise.

5.5. Finalisation of Complaint Resolution

5.5.1. PSG will endeavour to make every effort to resolve all complaints within the most reasonable and practical timeframe. However, depending on the nature and complexity of the complaint, it may take longer to come to a final solution.

5.5.2. Complaints may only be recorded as being complete once an acceptable resolution has been agreed to and actioned with the complainant.

5.5.3. Despite this, complaint files will not be closed until the relevant Key Individual, DHF or Compliance Officer has reviewed and agreed with the outcome. Relevance of individual providing sign off will be determined by the nature and complexity of the complaint.

5.5.4. The Compliance Officer may decide to reopen cases where the resolution is not considered to be appropriate or where it does not uphold the TCF outcomes. This will be done in consultation with senior management of the business unit concerned.

5.6. Notification of Complaint Resolution Outcome

5.6.1. Upon resolution of a complaint, you will be advised in writing of the outcome as soon as reasonably possible. If the outcome is favourable to you, appropriate redress, as determined by the responsible person, must be instituted without delay.

5.6.2. If the outcome is not favourable to you, full reasons for the outcome will be furnished to you and you will be advised/reminded of your right to address the complaint to the relevant Ombud within 6 months.

5.6.3. The complaints register will be updated with all developments/activities and clearly indicate the outcome.

6. Alternative procedures available

PSG should always be given the opportunity to resolve the complaint. However, if you do not feel satisfied with the response from PSG, you may refer your complaint to the Ombud or Adjudicator depending on the nature of your complaint or follow any of the below procedures:

6.1. If you are not satisfied with the response you received from the dedicated PSG staff member you may appeal or request an escalation to senior management, a DHF and/or the Compliance Officer.



- 6.2. Submit a formal complaint to the relevant Ombud's Office within 6 months of receiving our final response:
- The rules on proceedings of the office of the Ombud for Financial Services Providers (FAIS Ombud) is attached hereto as annexure C.
 - The procedure for lodging a complaint with the Ombudsman for long-term insurance is attached hereto as Annexure D.
 - The procedure for lodging a complaint with the Pension Fund Adjudicator is attached hereto as Annexure E.
- 6.3. Approach the small claims court.
- 6.4. Consult with an Attorney to pursue the matter by means of further legal action.

7. Contact details

Any complaint can be addressed to PSG Wealth via fax, email, post or hand delivery.

Details of PSG Wealth	
Telephone	011 996 5200
Fax	086 077 4774
Email address	Wealth.Escalations@psg.co.za
Physical address	Building 1, The Ingress, Corner of Magwa and Lone Creek Crescents, Waterfall City, Waterfall, 2090
Postal address	PO Box 61295, Marshalltown, 2107
Website	www.psg.co.za



Annexure A: Complaints resolution framework - PSG Life

1. Introduction

PSG Life Ltd, (Hereinafter referred to as "PSG Life" or "the insurer") is an authorised financial services provider and licenced Long-term Insurer with a strong focus on policyholder satisfaction that is in alignment with Treating Customers Fairly (TCF). PSG Life is committed to deliver service of the highest quality. We undertake to deliver all services in line with our mission statement and to treat our policyholders fairly. PSG Life endeavours to speedily resolve all complaints and to treat all complainants with respect.

This complaints management framework serves to guide the way complaints are handled and formalise the practices to effectively resolve complaints to ensure that our customers are satisfied with the services that we render.

2. Purpose

The purpose of this framework is to provide clear and concise rules for when PSG Life receives complaints.

It provides for the successful resolution in terms of the Policyholder Protection Rules ensuring the fair treatment of all Policyholders and Beneficiaries that -

- a. is proportionate to the nature, scale and complexity of the business and risks; is appropriate for the business model, policies, services, policyholders, and beneficiaries of the insurer;
- b. enables complaints to be considered after taking reasonable steps to gather and investigate all relevant info and circumstances, with due regard to the fair treatment of complainants; and
- c. does not impose unreasonable barriers to complainants.

PSG Life's complaint processes and procedures are transparent, visible and accessible. The process to lodge a complaint is communicated to our clients in their policy documents.

A Complaints Officer has been appointed by PSG Life. The Complaints Officer is responsible for the approval and implementation of this policy.

PSG Life strives to provide fair service to its policyholders and avoid complaints. Where a complaint arises, PSG Life views such complaints as an opportunity to engage with policyholders, repair relationships, avoid reoccurrences and improve our process and service to policyholders.

Complainants will not be charged for lodging complaints with PSG Life.

3. Definitions

"**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 -

- a. 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
- b. the insurer or its service provider's maladministration or wilful or negligent action or failure to act, has caused the person harm, prejudice, distress or substantial inconvenience; or
- c. 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, failure 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; and includes any interest on late payment of any amount referred to in (b) or (c);

"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 finalised 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 finalised wholly or partially in favour of the complainant and that-

- a. the complainant has explicitly accepted that the matter is fully resolved; or



- b. it is reasonable for the insurer to assume that the complainant has so accepted; and
- c. 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.

4. Commitment

Client priority and satisfaction is a core business principle of PSG Life. PSG Life values the support of its 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 complaints' resolution procedure for the handling of complaints which also aim to set standards and guide aggrieved clients.

5. Record keeping monitoring, and analysis of complaints

- 5.1. PSG Life will ensure accurate, efficient and secure recording of complaints-related information.
- 5.2. The following are recorded in respect of each reportable complaint
 - 5.2.1. relevant details of the complainant and the subject matter of the complaint
 - 5.2.2. copies of all relevant evidence, correspondence and decisions
 - 5.2.3. the complaint categorization; and
 - 5.2.4. progress and status of the complaint, incl. whether turnaround times were adhered to.
- 5.3. PSG Life maintains ongoing data regarding the number of reportable complaints, including reportable complaints:
 - 5.3.1. received, upheld, outstanding, rejected and reasons for the rejection;
 - 5.3.2. escalated to the internal complaint's escalation process; and
 - 5.3.3. referred to an ombudsman and the outcome.
- 5.4. PSG Life records all details regarding compensation payments and goodwill payments made, including the amounts of such payments.

The above information will be analysed to improve policyholder experience and to report to the Board, management, subcommittees and the relevant regulators.



6. Categorisation of complaints

All complaints received will be categorise accordance with Treating Customers Fairly outcomes and will at least include the following complaints relating to the:

- design of a policy or service (TCF outcome 2);
- information provided to policyholders (TCF outcome 3);
- advice (TCF outcome 4) provided;
- policy performance (TCF outcome 5);
- service to policyholders (TCF outcome 5);
- policy accessibility, changes or switches (TCF outcome 6);
- complaints handling (TCF outcome 6);
- other complaints.

7. Logging a complaint

7.1. Preferred process

PSG Life provides complainants with multiple ways to submit complaints, as follows:

- logging a complaint with an adviser;
- logging a complaint with the Complaints Officer or call centre on +27(11) 996 5200; or
- sending an email to the complaint mailbox at Wealth.Escalations@psg.co.za.

If the complaint is logged through the first two methods, the call centre or adviser is required to notify the Complaints Officer immediately via the dedicated complaints email.

Further, if a complaint is logged via call centre or adviser, PSG Life will request the client to submit the complaint in writing.

All communications with a complainant will be in plain and simple language.

7.2. Information needed

The complainant is requested to provide the following information when lodging a complaint to enable PSG Life to assist with the complaint and reduce turnaround time:

- Name, surname and contact details;
- A complete description of the complaint;
- The name of the person who provided the financial service, if relevant;
- The date on which the event occurred;
- All supporting documentation relating to the complaint; and
- Method of preferred communication

7.3. Process to be followed upon receiving the complaint

- Acknowledgement of the complaint within 3 business days which will include the following:
 - Informing the client of the process, including escalation process;
 - Any additional information required;
 - The person dealing with the complaint; and
 - The indicative timelines for addressing the complaint.



- The claimant will regularly be informed of the progress of the complaint:
 - causes of any delay in the finalisation of a complaint and revised timelines; and
 - PSG Life's decision in response to the complaint.
- Outcome of the investigation
 - The claimant will be informed of the determination within 2 business days after its been made;
 - Reasons will be provided in case of complaint being rejected, if applicable;
 - Options provided to complainant to appeal the outcome internally or to take the complaint to the relevant ombudsman;
 - The payment process in the case where a complaint is upheld, if relevant; and
 - The payment process in the case of goodwill or compensation payments, if relevant.

8. Escalation

Where a complainant wishes to escalate a complaint, such a complaint will be assigned to the relevant senior manager or Head of Client Services for resolution. An escalation of a complaint relates to complaints about the complaints process.

9. Appeal/ review

A complainant can internally appeal a determination decision made. The appeal will be heard by the Designated Handling Function (DHF). The function is constituted by representation from the complaints and compliance areas, management and other key persons.

Complaints may only be recorded as being complete once an acceptable resolution has been agreed to and actioned with the complainant.

10. Engagement with the Ombud

Complainants may refer a complaint at any time to the relevant Ombudsman. Any complaint received from an ombudsman will be treated with the same respect and care as any other complaint. PSG Life will endeavour to resolve any complaint before a final determination or ruling is made by an Ombud without impeding or unduly delaying a complainant's access to an Ombud. PSG Life's Compliance Officer will be responsible to liaise with the Ombud and report to the Authority where required. PSG Life maintains a open and honest communication and co-operation between itself and any Ombud with whom it deals.



Complaints relating to PSG's Endowment and Living Annuity may be addressed to the Ombudsman for Long-Term Insurance.

Details of the Ombudsman for Long-Term Insurance	
Telephone	+27 (21) 657 5000 or 0860 103 236
Fax	+27 (21) 674 0951
Email address	info@ombud.co.za
Postal address	Private Bag X45, Claremont, 7735
Website	www.ombud.co.za

If a complaint is related to financial advice, the matter to the Financial Advisory and Intermediary Services (FAIS) Ombudsman within 6 months of receiving a final response from PSG Life.

Details of the FAIS Ombudsman	
Telephone	+27 (12) 470 9080 or 0860 324 766
Fax	+27 (12) 348 3447
Email address	info@faisombud.co.za
Postal address	PO Box 74571, Lynnwood Ridge, 0040
Website	www.faisombud.co.za

Complaints relating to the PSG Wealth Retirement Annuity, Pension Preservation or Provident Preservation Fund may be addressed to the Pension Funds Adjudicator.

Details of the Pension Funds Adjudicator	
Telephone	+27 (12) 346 1738 or +27 (12) 748 4000
Fax	086 693 7472
Email address	enquiries@pfa.org.za
Postal address	PO Box 580, Menlyn, 0063
Website	www.pfa.org.za

Any complaint can be addressed via fax, email, post or hand delivery to PSG Wealth.

Details of PSG Wealth	
Telephone	011 996 5200
Fax	086 077 4774
Email address	Wealth.Escalations@psg.co.za
Physical address	Building 1, The Ingress, Corner of Magwa and Lone Creek Crescents, Waterfall City, Waterfall, 2090
Postal address	PO Box 61295, Marshalltown, 2107
Website	www.psg.co.za



Annexure B: Complaints resolution procedure - stockbroking

1. Definition of a compliant

A complaint in relation to the provision of regulated services, in which the client alleges that he has suffered, or is likely to suffer, financial prejudice as a result of the conduct by PSG Securities Ltd, a member of the JSE;

- 1.1. contravening or failing to comply with any instruction given by the client, or any agreement or mandate entered into with the client;-
 - 1.2. contravening or failing to comply with the rules and the directives;
 - 1.3. acting dishonestly, negligently or recklessly; or
 - 1.4. treating the client unreasonably or unfairly.
2. Your complaint can be written (via email to PSG.Securitiescompliance@psg.co.za) or oral (all telephone conversations are recorded) and we will investigate the complaint. In terms of the Group client complaints policy we will revert to you within 5 days after receipt of the complaint and advise if the complaint can easily be resolved or whether it is referred to another person with the necessary expertise to deal with the complaint appropriately.
 3. Your complaint will be resolved within 4 weeks from date of lodgement and if we cannot resolve it within that time we will give sufficient reason for not being in a position to do so.
 4. If you are not satisfied with the resolution, the JSE Rule 11.70 will be apply, and disputes over R2 000.00 will be referred to the JSE for dispute resolution by the Compliance officer of PSG Securities Ltd. Once referred by the member's compliance officer, the JSE may appoint an Ombud to consider a dispute within three weeks from receipt of all the documentation on which the complaint is based.
 5. All complaints will be kept for at least 5 years from date of lodgement.
 6. The complete JSE complaints and disputes procedure can be found on the JSE website at: www.jse.co.za under Market Regulation, JSE Equity Rules and specifically Section 11 of the Rules.

Complaints relating to PSG Securities or any other JSE related matter must be lodged by the member's compliance officer and not directly with the JSE.



Annexure C: Rules on proceedings of the office of the Ombudsman for Financial Service Providers

Timeframes for the Resolution of Complaints in terms of the Rules on Proceedings of the Office of the Ombud for Financial Services Providers, 2002.

1. Whilst the Complaints Resolution Procedure, as outlined in this document, has provided the timeframes for the escalation of complaints, in terms of the Rules of the Ombud's Office, a complaint must be acknowledged together with contact details of the relevant person if the complaint cannot be addressed by the Group's Compliance Department within 3 weeks of its receipt.
2. In terms of the Rules, a further 3 weeks (a total of 6 weeks from receipt of the complaint) is available for resolution of the complaint. If the Group's Compliance Department is unable to resolve the complaint to the satisfaction of the complainant within 6 weeks of receipt of the complaint, the responsible person (depending on level of escalation reached) must advise the complainant of his/her right to refer the complaint to the office of the Ombud within 6 months of receipt of the final notification in respect of the complaint.
3. **Requirements for submitting a complaint to the Office of the Ombud.**
 - 3.1. The complaint must fall within the ambit of the FAIS Act and the Rules.
 - 3.2. The Group's Compliance Department must have failed to address the complaint satisfactorily within 6 weeks of its receipt.
 - 3.3. The act, or omission, complained of must have occurred at a time when the Rules were in force.
 - 3.4. The complaint must not constitute a monetary claim in excess of R800 000 unless the Group and its Associates have agreed in writing to this limit being exceeded or the complainant has abandoned the amount in excess of R800 000.
 - 3.5. The complaint must not relate to investment performance of a financial product which is the subject of the complaint, unless such performance was guaranteed expressly or implicitly or such performance appears to the Ombud to be deficient as to raise a prima facie presumption of misrepresentation, negligence or maladministration on the part of the person against whom the complaint is brought.
 - 3.6. The complaint must endeavour to resolve the complaint with the Group and its Associates prior to submitting a complaint to the Office of the Ombud. The complainant must satisfy the Ombud of this and provide the final response (if any) from the Group's Compliance Department as well as the complainant's reasons for disagreeing with the response.
 - 3.7. A complaint must be accompanied by available documentation in the complainant's possession.



Case fees, costs and interest

- 3.8. The Ombud may require the complainant to pay a case fee not exceeding R1 000.00 to the Office of the Ombud when accepting a complaint.
- 3.9. The case fee is not refundable irrespective of the outcome of the matter.
- 3.9.1. When making a final determination, the Ombud may grant costs against the Group, its Associates or the complainant, in either case in favour of the other party to the complaint or in favour of the Office of the Ombud.
- 3.10. Any award of interest and costs forms part of the relevant final determination of the Ombud.

4. Contact Details

Details of the FAIS Ombudsman	
Telephone	+27(0)12 470 9080 or /+27(0)12 470 9097
Fax	+27(0)12 348 3447
Email address	info@faisombud.co.za
Postal address	PO Box 74571, Lynwood Ridge, 0040
Website	www.faisombud.co.za



Annexure D: Procedure for lodging a complaint with the Ombudsman for Long-term Insurance

Step 1

Contact your insurer first.

Your insurer should be given the opportunity to resolve the problem or complaint before it is referred to the Ombudsman.

Step 2

Contact the Ombudsman for Long-term insurance if you are not satisfied with the response.

Requirements for complaints submitted to the Ombudsman:

- The complaint must be in writing, or with the Ombudsmans' assistance at telephone.
- You need to provide them with the following information:
 - i. policy number/s;
 - ii. insurance company;
 - iii. policyholder contact details;
 - iv. factual summary of your complaint; and
 - v. letter of mandate if you are writing on behalf of the policyholder or beneficiary.
 - vi. Keep the details of your complaint as short and factual as possible.
 - vii. Provide them with copies of supporting documents referred to in the complaint, including correspondence with the insurer.
 - viii. Please write neatly. Type if possible. Black ink should be used for faxed correspondence.
 - ix. A complaint can be submitted in the language of your choice.

Step 3

- You will receive a letter of acknowledgement advising you about the line of action the Ombudsman intend to take.
- Should the complaint fall within the ambit of our rules, the Ombudsman will write to the insurer concerned requesting an investigation of the matter.
- The insurer is requested to respond within six weeks. On receipt of a written response the complaint will either be decided and the complainant advised accordingly or further information or comment might be requested from either or both parties.

Costs

This is a service free of charge to the public.

The operating costs of the office are met by subscribing members of the long-term insurance industry.



Contact details

Details of the Ombud for Long-Term Insurers	
Telephone	+27(0)21 657 5000
Fax	+27(0)21 674 0951
Email address	info@ombud.co.za
Postal address	Private Bag x45, Claremont, Cape Town, 7735
Website	www.ombud.co.za



Annexure E: Procedure for lodging a complaint with the Pension Fund Adjudicator

Section 30A of the Pension Funds Act, 24 of 1956, prescribes the procedure to be followed in lodging a complaint.

Step 1

- The complainant must first address in writing his/her complaint to the respondent/s for a resolution.
- The complainant must allow the respondent/s 30 days in which to resolve the complaint.

Step 2

Contact the Ombudsman for Long-term insurance if you are not satisfied with the response.

- If the respondent/s fails to resolve the complaint satisfactorily within 30 days, the complainant can lodge such a complaint with the adjudicator. The written complaint to the Adjudicator must disclose the following:
 - i. Who the complainant is:
 - Full names and identity numbers
 - Contact details
 - ii. Who the respondent/s is/are:
 - Full names registered names (if its fund or employer)
 - Contact details
 - iii. The relations between the complainant and the respondent/s:
 - For example, membership in the fund or a beneficiary of a member etc;
 - iv. The complaint issue:
 - What legal wrong has been caused to the complainant by the respondent/s.
 - v. The relief sought
 - How the wrong caused to the complainant can be addressed.

A complaint to the Pension Funds Adjudicator can be submitted on the website of the Adjudicator (<https://www.pfa.org.za/Complaints/>). The Complainant must complete the complaint form and submit it online provided that the step 1 above has been completed.

Contact details

Details of the Pension Funds Adjudicator	
Telephone	+27(0)12 346 1738
Fax	+27(0)86 693 7472
Email address	enquiries@pfa.org.za
Postal address	41 Matroosberg Road, Ashlea Gardens, Pretoria, 0081
Website	www.pfa.org.za