

COMPLAINTS RESOLUTION POLICY

Prepared by Shivani Nair: Legal, Compliance and Risk Manager
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This document sets out the terms and conditions which govern our relationship. If you have any questions, please call our Customer Care department on 0860 587 587.

1. PURPOSE

- 1.1. Legal & Tax Services (Pty) Ltd is an authorised financial services provider ('FSP') licensed in terms of the Financial Advisory and Intermediary Services Act (the FAIS Act). LTS means Legal & Tax Services (Pty) Ltd. This document explains the procedure, should you wish to complain about any of the financial services rendered by our business, and sets out the process that our business will follow in order to resolve the complaint.
- 1.2. The purpose of the Complaint Resolution Policy is to ensure compliance with the Short and Long Term Insurance Act, Financial Advisory and Intermediary Services Act (FAIS), the Policy Holder Protection Rules and any other applicable legislation.

2. WHAT COMPLAINTS ARE DEALT WITH IN TERMS OF FAIS

- 2.1. A complaint is defined in the FAIS Act as a specific complaint relating to financial services rendered by an FSP or its representative, either being advice or an intermediary service, which has been rendered on or after 1 October 2004 and where the complainant alleges that the FSP:
 - 2.1.1. Has contravened a provision of the FAIS Act and as a result the complainant has suffered or is likely to suffer financial prejudice or damage;
 - 2.1.2. Has wilfully or negligently rendered a financial service to the complainant which has caused or is likely to cause prejudice or damage to the complainant; or
 - 2.1.3. Has treated the complainant unfairly.

3. HOW TO SUBMIT A COMPLAINT

- 3.1. We request that your complaint be submitted to us in writing within 30 (thirty) days of a dispute arising. Please address your written complaints to the Complaints Officer: complaints@legalandtax.co.za. It can also be submitted either by hand, post, or fax to the LTS contact details that appear at the bottom of this page. The complaint should contain sufficient detail regarding:
 - 3.1.1. The full names, ID/registration number and contact details of the complainant;
 - 3.1.2. The full names, ID/registration number and contact details of the client (if different from the complainant);
 - 3.1.3. Full details of the policy or policy number where applicable;
 - 3.1.4. Specific details about the nature of the complaint which would include sufficient facts, dates and supporting documentation to enable LTS to deal with the complaint quickly and fairly.

4. WHAT WILL HAPPEN ONCE A COMPLAINT IS MADE

- 4.1. The following is a step-by-step guideline of how a complaint will be dealt with, once received by us:
 - 4.1.1. The complaint will be acknowledged within 24 (twenty four) hours of receipt.
 - 4.1.2. It will be assessed and, if a valid complaint, will be logged into our central complaints register.
 - 4.1.3. The complaint will be allocated to our trained and skilled Complaint's Officer.
 - 4.1.4. The Officer will investigate and revert to you with our findings within 5 (five) to 10 (ten) business days. You may be requested to provide additional information before we provide you with a final resolution. If we require further time to investigate the complaint, this will be communicated to you in writing.



4.1.5. You will receive a response in writing or verbally with full reasons.

4.2. Legislation requires us to advise the complainant in writing within 6 (six) weeks of receiving the complaint if the complaint cannot be resolved and the reason(s) why the complaint could not be resolved. In the event that the complaint cannot be resolved, the complainant may have recourse to the following, whichever is applicable:

- 4.2.1. Refer the matter to the Insurer being Centriq Insurance Company Limited (Legal) and Centriq Life Insurance Company Limited (Funeral and Healthcare);
- 4.2.2. Refer the matter to the FAIS Ombud within 6 (six) months of notification that the claim cannot be resolved or within 6 (six) months of the FSP's failure to deal with the claim;
- 4.2.3. Refer the matter the Ombudsman for Short (Legal) or Long (Funeral and Healthcare) Term Insurance, if appropriate and within their jurisdiction;
- 4.2.4. Seek legal advice from an attorney regarding any legal action that may be taken;
- 4.2.5. Refer the matter to arbitration or mediation.

| Particulars of FAIS Ombud | |
|---------------------------|---|
| Name | The FAIS Ombud |
| Postal address | PO Box 74571, Lynwood Ridge, 0040 |
| Physical Address | Kasteel Park Office Park, Orange Building, 2nd Floor, c/o Nossob & Jochemus Street, Erasmus Kloof, Pretoria, 0048 |
| Tel Number | 012 762 5000 / 086 066 3247 |
| Fax Number | 012 348 3447 |
| Email | info@faisombud.co.za |
| Website | http://www.faisombud.co.za/ |

| Particulars of short-term insurance Ombud | |
|---|---|
| Name | The Ombudsman for Short-Term Insurance |
| Postal address | PO Box 32334, Braamfontein, 2017 |
| Physical Address | 1 Sturdee Avenue, First Floor, Block A, Rosebank, Johannesburg, 2196 |
| Tel Number | 011 726 8900 / 0860 726 890 |
| Fax Number | 011 726 5501 |
| Email | info@osti.co.za |
| Website | http://www.osti.co.za/ |

| Particulars of long-term insurance Ombud | |
|--|---|
| Name | The Ombudsman for Long-Term Insurance |
| Postal address | Private Bag X45, Claremont, Cape Town, 7735 |
| Physical Address | 3rd Floor, Sunclare Building, 21 Dreyer Street, Claremont, Cape Town, 7700 |
| Tel Number | 021 657 5000 / 0860 103 236 |
| Fax Number | 021 674 0951 |



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|---------|-------------------------|
| Email | info@ombud.co.za |
| Website | http://www.ombud.co.za/ |

5. OUR COMMITMENT

- 5.1. We have embedded the Principals of TCF (Treating Customers Fairly) into our culture and they form the foundation of our commitment to our policyholders.
- 5.2. TCF was implemented by the Financial Services Board now The Financial Services Conduct Authority (FSCA) to ensure that the fair treatment of customers is embedded within the culture of all financial services providers to ensure customer confidence and offer appropriate products and services with due diligence.
- 5.3. We subscribe to all six outcomes of TCF which are as follows:

Outcome 1: Customers are confident that they are dealing with providers where the fair treatment of customers is central to the provider's culture.

Outcome 2: Products and services marketed and sold in the retail market are designed to meet the needs of identified customer groups and are targeted accordingly.

Outcome 3: Customers are given clear information and are kept appropriately informed before, during and after the time of contracting.

Outcome 4: Where customers receive advice, the advice is suitable and takes account of their circumstances.

Outcome 5: Customers are provided with products that perform as providers have led them to expect, and the associated service is both of an acceptable standard and what they have been led to expect.

Outcome 6: Customers do not face unreasonable post-sale barriers to change product, switch provider, submit a claim or make a complaint.

- 5.4. Our policy is further committed to:
 - 5.4.1. Resolve complaints by means of a fair and practical resolution process;
 - 5.4.2. Take steps to investigate and respond promptly to the complaint;
 - 5.4.3. Deal with complaints in a timely and fair manner, with each complaint receiving due consideration in a process that is managed appropriately and effectively;
 - 5.4.4. Ensure that a full and appropriate level of redress is offered to the complainant, without delay, where the complaint is resolved in favour of the complainant.

This policy shall not be invalidated on account of any incorrect statement made in good faith, unless the incorrectness of such statement is of such a nature as to be likely to have materially affected the assessment of the risk under the policy at the time the policy was issued.