## **Customer Complaints Procedure**



We are committed to providing you with exceptional levels of service but we recognise that occasionally things do go wrong, so this procedure outlines the process we will use to deal promptly and fairly with the issue you have raised. To make sure we learn from any complaints, we record them centrally, ensuring that any matter is dealt with properly and that action is taken to avoid a similar problem happening in the future.

If your complaint relates directly to the service provided by Magnet Insurance, your insurance intermediary, you should contact your usual contact at our firm or alternatively you can address your complaint to:

Complaints, Magnet Insurance Services Ltd, Newark Beacon, Cafferata Way, Newark, NG24 2TN or email: <u>info@magnetinsurance.co.uk</u> or phone: 01636 858249

If your complaint relates to the service provided by your Insurer, e.g. a claim, you should refer to the Insurers Complaints Procedure noted within your Policy.

## How Magnet will handle your complaint

We will aim to resolve your complaint on the spot or if this is not possible within 3 business days of receipt. If you are satisfied with our response, we will send you a confirmation.

If we cannot resolve your complaint straightaway, within 5 business days of receiving it we will send you an acknowledgement and where possible, fully resolve your complaint.

An employee, who was not involved in the subject matter of the complaint, will investigate your complaint. We will provide their details, giving their name and job title.

We will always aim to resolve your complaint as soon as possible. When we have investigated your complaint, we will send you a written response.

If we cannot resolve your complaint within 4 weeks, we will contact you with the reason why.

Before the 8 week anniversary of receipt of your complaint, we will confirm in writing our final decision or an update pending our final decision, which will either:

- · Accept the complaint and offer redress where appropriate or
- Advise that we have been unable, so far, to resolve the complaint and provide the reason e.g. sufficiently complex to warrant further investigation, information required from insurer etc., and confirm when you may expect a further response or
- Reject the complaint and give a full explanation of our reasons. We will include a copy of the Ombudsman's leaflet '*Want to take your complaint further?*' in all final resolution and 8 week response letters.

## If you are unhappy with our final response to your complaint

You may be eligible to refer a complaint to the Financial Ombudsman Service (FOS) if:

- you are a private policyholder or
- a natural person acting for purposes which are outside his trade, business, craft or profession or
- a micro enterprise (an enterprise that employs fewer than ten people and whose annual turnover and/or annual balance sheet total does not exceed EURO 2 million) or
- a charity which has an annual income of less than £6.5 million at the time the complainant refers the complaint;
- a trustee of a trust which has a net asset value of less than £5 million at the time the complainant refers the complaint;

The address of the Ombudsman is:

The Financial Ombudsman Service (FOS) Exchange Tower, London, E14 9SR Tel: 0800 023 4 567 Email: <u>complaint.info@financial-ombudsman.org.uk</u> FOS Website: http://www.fos.org.uk/