

Complaint and dispute management policy

We recognise that implementing effective processes for the identification and recording of client dissatisfaction supports our continuous improvement.

If you are not satisfied with a product, service or if there has been a possible breach by us or our authorised representative you can lodge a complaint following the procedure set out below.

How to lodge a complaint

You can lodge a complaint with us in person, at one of our offices, by phone, mail, email or online. Our contact details appear below.

Phone: 08 8372 7100

Mail: Suite 4 / 147 Goodwood Rd, Goodwood SA 5034

Email: protectit.insure@protectit.au

We have access to various services that can assist you in lodging a complaint. These include the National Relay Service (for hearing impaired) or translator services. If you need any other assistance to make a complaint, please let our staff know and they will do their best to help you.

Our approach to dealing with your complaint

We will acknowledge receipt of your complaint within twenty-four (24) hours or as soon as practicable.

We will provide you the name and relevant contact details of the person responsible for handling your complaint.

When managing a complaint, we endeavor to be objective and responsive to achieve a fair, reasonable, and timely outcome. We will assess your complaint objectively and investigate as needed.

Our priority is to resolve your complaint at the earliest opportunity. To do this, your complaint will be managed by a team member with the appropriate knowledge, experience and authority.

We will keep you informed about the progress of your complaint at least every ten (10) business days until it is resolved, unless it is resolved earlier or you agree to a different timeframe.

We will provide a written response to you within thirty (30) days from the date your complaint is received.

The written response will include:

- the final outcome of our investigation of your complaint;
- the reason for our decision;
- your right to take your complaint to AFCA if you are not satisfied with our decision; and
- the contact details of AFCA.

A written response may not be provided where, within five (5) business days of receipt of your complaint, we have been able to resolve your complaint to your satisfaction, or we have given you an explanation and/or an apology when we can take no further action to reasonably address your complaint. A written response will be provided where your complaint is about financial hardship, a declined claim, the value of a claim or you have requested one.

If your complaint is resolved to your satisfaction within five (5) business days of receipt of your complaint, we will confirm the resolution in writing.

If we are unable to resolve your complaint

If we cannot make a decision within thirty (30) days of receipt of your complaint, we will:

- contact you in writing and provide the reasons for the delay;
- inform you about your right to take the complaint to Australian Financial Complaints Authority (**AFCA**) and provide you with the contact details for it; and
- inform you of your right to report alleged breaches of the National Insurance Brokers Association Code of Practice to the Insurance Brokers Code Compliance Committee (if applicable).

Contact AFCA

If the matter is not resolved to your satisfaction, you can refer your complaint to the Australian Financial Complaints Authority (**AFCA**).

AFCA provides fair and independent financial services complaint resolution that is free to clients.

AFCA can be contacted as follows:

Tel: 1800 931 678

Mail: Australian Financial Complaints Authority

GPO Box 3, Melbourne VIC 3001

Email: info@afca.org.au

Website: afca.org.au