



COMPLAINTS PROCEDURE

Our Promise on Service

We are committed to providing an exceptional level of service and customer care. We recognise that things do go wrong occasionally and you may feel we have not provided the service you expected.

How to Contact Us

If you feel you have cause for complaint you can either write to us or telephone with your concerns. Please provide the following information

- Your Policy or claim number
- A clear and concise reason for your complaint

What will happen if you complain

Our aim will be to resolve your complaint within 1 working day of receiving all of the above information. Where that is not possible we will write to you within 5 working days to:

- Confirm who is handling your complaint
- Provide you with a copy of this document and our Terms of Business Agreement

We will aim to resolve your complaint within 4 weeks

What to do if you are still unhappy

If, when receiving our response you are still unhappy, please confirm your reasons in writing to the Managing Director to consider further.

The Managing Director will send you a final decision letter.

When we write to you with our final decision, we will enclose a leaflet telling you how to approach the Financial Ombudsman Service, an independent arbitrator, should you still be unsatisfied.

Financial Ombudsman Service

The Ombudsman is an independent body that arbitrates on complaints about general insurance products and other financial services.

It will only consider your complaint if:

- We have provided you with a written confirmation that our initial complaints procedures have been exhausted (the final decision letter)
- Your business (if applicable) has a turnover of than £1,000,000

Please note that you have 6 months from the date of the final response in which to refer your complaint to the Ombudsman. Referral to the Ombudsman will not affect your right to take legal action.

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