**Complaint Form**

**Section 1 – Complainant Details**

1. Are you the Complainant?

|  |  |
| --- | --- |
| **Yes** | If you are, please enclose evidence of your identity with this form. Acceptable forms of identity are copies of either 1) driving licence; 2) passport; or 3) birth certificate. |
| **No** | If you are acting on behalf of the data subject, please enclose their written authority/consent with this form together with evidence of their identity i.e. copies of either their 1) driving licence; 2) passport; or 3) birth certificate. Please also provide the declaration set out in Section 4 of this form, typed on your company letterhead and signed, as evidence of your identity. |

***If you have selected ‘No’ above, please provide the following information, otherwise skip to Section 2 -***

|  |  |
| --- | --- |
| Company: |  |
| Full Name of the Point of Contact\*: |  |
| Correspondence Address\*: |  |
| Postcode\*: |  |
| Telephone Number: |  |
| Email Address: |  |

1. What is your relationship with the data subject?

1. Why are you making this complaint on their behalf?

We need the person affected by the issue giving rise to the complaint to sign the consent below, to allow you deal with the matter on their behalf. If they are unable to sign for any reason, please tell us why below.

Consent

I authorise *(Insert the name in section 1)* to make my complaint to QBE and to the Financial Services and Pension Ombudsman. I understand that QBE may give personal information about me and my complaint to this named person.

Signed      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 2 – Complainant Details**

|  |  |
| --- | --- |
| Title: |  |
| Full Name: |  |
| Current Address: |  |
| Postcode: |  |
| PPS Number (if applicable) |  |
| Telephone Number: |  |
| Email Address: |  |
| Date of Birth: |  |

**Section 3 - About your complaint.**

1. What section of the business does your complaint relate to. Please provide where available;
2. QBE Policy Number

1. QBE Claim Number

1. QBE Office communicating with you

1. The name of the QBE employee or agent communicating with you

1. When did the action or incident you are complaining happen?

1. Please outline how you have suffered as a result of what happened and the losses you suffered

1. To support your case, please send copies of any letters, emails or contacts and include any information you think might assist us investigate the matter. Original documents will be copied and returned to you. All information is treated as confidential. If you require more space, please use extra pages and attach them to this form.
2. Please specify the form in which you will require the requested data - **Electronic**  **Hard Copy**

If electronic, please confirm the e-mail address that should be used -

**Section 4 – Declaration** *(Mandatory)*

I am the data subject / authorised by the data subject\* named above and hereby request that QBE EO deal with the complaint outlined above. I have enclosed the required documents stated in *Section 1* above and hereby confirm that all the information supplied in this form is accurate to the best of my knowledge.

Signed      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(\*delete / strike out as applicable)***

**Returning this form:**

When you have completed this form, please return it with the required document(s) to:

Michael Fleming

Claims Manager

QBE Europe SA NV

Clarendon House

6-10 Suffolk Street

Dublin 2

Ireland

**E-mail**: [Michael.fleming@ie.qbe.com](mailto:Michael.fleming@ie.qbe.com)

*We will acknowledge receipt of your complaint by e-mail where possible or by post. We will not be able to deal with your complaint unless we have received all the requested documents. We reserve the right to request the sight of original documents if not satisfied with the submitted copies and will return any original document thus received by recorded delivery. However, we take no responsibility for items being lost in the post during their return to you.*