

COMPLAINTS HANDLING PROCEDURES

A.D.S. Insurance Brokers Ltd is required by its Regulator, the Financial Services Authority, to have in place effective internal complaints handling procedures for handling any expression of dissatisfaction from its Clients, whether oral or written and whether justified or not, about its general insurance related activities.

Set out below are the procedures that we have put in place to ensure that complaints are handled fairly, effectively and promptly, and resolved at the earliest possible opportunity. Our objective is to resolve complaints internally, whenever possible, in order to minimise the number of cases where our Clients need to refer the issue to a higher dispute resolution authority.

How To Complain

If you should have any complaint about a general insurance related matter or about our service generally, we would ask you to make your complaint to Tony Scott, Director at the following address:

136 Turners Hill
Cheshunt
Herts EN8 9BN

You may make your complaint at any time and by any reasonable means (for example by letter, telephone, fax, e-mail or in person), although we would prefer you to contact us in writing, detailing the precise nature of your complaint, so that there can be no misunderstanding.

How We Will Investigate Your Complaint

Tony Scott, Director will record your complaint. The complaint will then be handled either by Tony Scott himself or, where appropriate, by a member of staff of sufficient competence who was not directly involved in the matter which is the subject of your complaint.

We will handle your complaint competently, diligently and impartially.

The person handling the investigation will, however, have authority to settle complaints himself (including the offering of redress where appropriate) or have ready access to the Directors who have that authority.

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How We will Respond to your Complaint

We shall attempt to resolve your complaint by close of business on the business day following its receipt.

We shall regard your complaint as resolved when you have indicated that you accept our response. Neither our response nor your acceptance has to be in writing.

If we are unable to resolve your complaint by close of business on the next business day following receipt, we will send prompt written acknowledgement (usually within five business days) giving you the name and job title of the person who will be carrying out the investigation and detailing when you can expect to receive a response.

We will keep you informed of any progress made with the complaint and the measures being taken to resolve the matter.

Within eight weeks of receiving your complaint we will provide you with a written final response informing you of the outcome of our investigation. This letter will:-

- i. Advise whether we have accepted the complaint and detail the nature and terms of any offer or remedial action, compensation or redress which we may consider appropriate.
- ii. Advise whether we are offering any remedial action or redress without accepting the complaint or,
- iii. Explain our reasons for rejecting the complaint.
- iv. Indicate when we expect to be able to provide a final response in the unlikely event that we are not in a position to make a final response after eight weeks.

At this time we will also inform you that if you are dissatisfied with our final response, you may refer your complaint to an Approved Dispute Resolution Facility.

Approved Dispute Resolution Facilities

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| Eligible Complainant
(see definition below): | The Financial Ombudsman.
The Financial Ombudsman Service’s explanatory leaflet will be enclosed with our communication. |
| Non-Eligible Complainant: | Insurance Companies use various Dispute Resolution Facilities and we will provide you with full details of the Appropriate body with our final response as detailed below. |

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Definitions:

A person is an eligible complainant if:

- i) He is a potential customer, a current customer or a past customer of A.D.S. Insurance Brokers Ltd.
- ii) The complaint arises out of matters relevant to his being or having been a customer as described in (i) above.

- iii) He is:
a private individual;

a micro enterprise with turnover or an annual balance sheet of less than £2,000,000 and fewer than 10 employees at the time the complainant refers the complaint to A.D.S. Insurance Brokers Ltd.

a charity with an annual income of less than £1,000,000 at the time the complainant refers the complaint to A.D.S. Insurance Brokers Ltd.

a Trustee of a Trust with a net asset value of less than £1,000,000 at the time the complainant refers the complaint to A.D.S. Insurance Brokers Ltd.