

UBL Insurers Limited
Complaint form

1. Information for complainants

A complaint should only be lodged if you have been unable to resolve your issue or concern informally. Complainants may be contacted and asked to provide additional information to support their complaint.

2. Personal details

Title Mr. Mrs. Ms. Miss

3. Contact details

Address: _____

Mailing address: _____

Email address: _____

Telephone number: _____

Mobile phone number: _____

4. Complaint details

Have you lodged a complaint about this issue before?

Yes No

5. Complaint summary

When it happened

Where it happened

Who was involved

What happened (details of your complaint)

What would you like to happen to resolve your complaint

Attach any documentation that supports your complaint

6. Acknowledgement

All the information provided above is true and correct to the best of my knowledge.

Signature: _____

Date: _____

8. Office use only

Action officer _____

Position _____

Date: _____