

Gard Complaint Form

Please complete this form so that we can review and respond to your complaint.

Definitions

For the purpose of our complaints handling process:

Complaint

A complaint is an expression of dissatisfaction about an insurance contract or a service we have provided.

Complainant

A complainant is a person or organisation with an interest in the insurance contract, such as a member, client or broker, who submits a complaint.

1. Your name and contact details

Full name

Email address

Postal address

Contact number

2. Preferred method of contact

Please select one:

Email Post Phone

3. Insurance or service involved

Please provide details of the insurance, policy, claim, service or department your complaint relates to.

Policy, claim or reference number, if known

Type of insurance or service

Gard contact person or department, if known

4. Nature of complaint

Please select the option that best describes your complaint:

- Service issue Delay Communication issue
 Claim handling Policy or cover issue Invoice or payment issue
 Data or privacy concern Other

If other, please specify: _____

5. Description of complaint

Please describe what happened, including relevant dates, people involved, correspondence, decisions or actions taken.

6. Outcome sought

What would you like Gard to do to resolve your complaint?

7. Supporting information

Do you wish to provide supporting documents or evidence?

- Yes No

If yes, please include copies of any relevant documents, correspondence, screenshots or other supporting information when submitting this form.

8. Declaration

Please tick to confirm:

- I confirm that the information provided in this form is accurate to the best of my knowledge.
 I consent to the Gard group processing the personal data set out in this form, and any supporting information provided, for the purpose of handling this complaint.

Signature

Date
