



UIA INSURANCE (LIMITED)

KINGS COURT, LONDON ROAD, STEVENAGE, HERTS SG1 2TP

How your complaint will be handled

UIA is a member of the Association of British Insurers (ABI), and is authorised and regulated by the Financial Services Authority (FSA). As part of our "Insurance with Principles", UIA take any complaints received very seriously as we aim to provide a high quality of service to all our customers.

UIA welcome feedback from our customers in any form. This factsheet explains the procedure that UIA will follow in the event that you feel dissatisfied with any aspect of the service you receive.

Procedure

A complaint may be made in writing either by letter fax or e-mail, or verbally either in person or by telephone. When contacting us, it is important that you fully explain your complaint, providing all the details you feel are relevant. UIA promotes an internal complaints procedure which enables us to fully consider all of your concerns and gives us the opportunity to resolve these for you. The complaints procedure is as follows:

1. In the first instance, please contact us on **01438 761764***. Please be ready to quote your policy or claim number. You may contact us by letter or fax if you prefer.

2. Should the matter not be resolved to your satisfaction, you may escalate your complaint to:

The Managing Director
UIA (Insurance) Ltd
Kings Court
London Road
Stevenage
SG1 2TP

3. If your complaint is not resolved to your satisfaction, you may ask the Financial Ombudsman Service to review your case. You can telephone this service on 0845 080 1800 or write to:

Financial Ombudsman Service
South Quay Plaza
183 Marsh Wall
London
E14 9SR.

Acknowledgement

Your complaint will be acknowledged in writing within 5 working days of receipt at UIA. Our acknowledgement letter will outline the timescales for completing the investigation and confirm that it will be investigated in accordance with the rules of the Financial Services Authority.

Investigation

We will investigate your complaint and issue a full reply explaining our decision. We aim to do this within 4 weeks. If at the end of 4 weeks we have not been able to complete our investigation, we will write to you explaining why it has not been possible to complete it, and let you know when you may expect a reply.

If we have not completed our investigation 8 weeks after receiving your complaint, we will write to you again explaining why it has not been possible to complete it. We will also advise you that if you are not satisfied with the progress of the investigation you may escalate the complaint by writing to the Managing Director. We will also enclose a booklet explaining the Financial Ombudsman Service, should you wish to refer the matter to them.

Outcome

Once our investigation is complete we will write to you with our decision, fully explaining how we came to that decision. The letter will, if appropriate, detail any offer being made to you. The letter will explain that if you are still not satisfied with the outcome of your complaint, you may escalate the complaint by writing to the Managing Director. We will also include a booklet explaining the Financial Ombudsman Service, should you wish to refer the matter to them.

*For quality and protection purposes, your call will be recorded. We exchange information with other insurance companies and the police to prevent fraud.