

## Complaints and Dispute Resolution Process

### Introduction

@ Risk Underwriting Pty Ltd acknowledges that effective complaints handling is a critical component of quality management. @ Risk Underwriting Pty Ltd acknowledges the complainant's right to complain and @ Risk Underwriting Pty Ltd will ensure that;

- (a) it provides necessary assistance to the complainant to lodge the complaint;
- (b) all complaints will be handled in a fair and transparent manner;
- (c) it will only request and review information relevant to the complaint; and
- (d) where an error or mistake is identified on the handling of the claim, we will immediately initiate action to correct it.

### Complaint definition

An expression of dissatisfaction made to us, related to our products or services, our staff or the handling of a complaint, where a response or resolution is explicitly or implicitly expected, or legally required. A complaint also includes such expressions of dissatisfaction made about us on a social media channel or account owned or controlled by us, where the person making the complaint is both identifiable or contactable.

### Complainant definition

An individual consumer or guarantor and/ or a small business.

Small Business means a business employing under 100 employees at the time of the act or omission by the financial firm that gave rise to the complaint.

### Internal Dispute Resolution (IDR)

Any complaint relating to this Policy or a claim should be addressed to @ Risk Underwriting Pty Ltd in the first instance – in most cases this will resolve your grievance.

Please send to:  
Customerservice@riskunderwriting.insure

Claims Complaints  
Lvl 5, 77 Pacific Highway  
North Sydney  
NSW 2060

We will acknowledge your complaint received in any form, telephone, email or letter within **1 business day**

We will respond to your complaint within **10 Business Days** provided we have sufficient information. We will usually require: The complaint to be

- Name, address, email and telephone number of the policyholder;
- Policy Number, claim number and product type;
- Name and address of the insurance intermediary through whom the policy was obtained;

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- Reasons why you are dissatisfied and an explanation of the situation that led to the complaint; and
- Copies of any supporting documentation you believe may assist @ Risk Underwriting in addressing your complaint appropriately

In cases where we cannot respond within 10 business days because we do not have the necessary information or we have not completed our investigation, our final decision will be provided to you within **30 Calendar Days** of the date on which you first made the complaint. @ Risk Underwriting will keep you informed of the progress no less than every 10 business days unless it is resolved earlier.

If we cannot resolve your complaint to your satisfaction, we will escalate your matter to Lloyd's Australia who will determine whether it will be reviewed by their office or the Lloyd's UK Complaints team. Lloyd's contact details are

Lloyd's Australia Limited

Email: [ldraustralia@lloyds.com](mailto:ldraustralia@lloyds.com)

Telephone: (02) 8298 0783

Post: Suite 1603 Level 16, 1 Macquarie Place, Sydney NSW 2000

A final decision will be provided to you within 30 calendar days of the date on which you first made the complaint unless certain exceptions apply.

If our final decision does not resolve your complaint to your satisfaction we will provide you with an Internal Dispute Resolution Delay Notification outlining the reasons for the delay and your right to complain to the Australian Financial Complaints Authority (AFCA)

### External Dispute Resolution (EDR)

You may refer your complaint to the Australian Financial Complaints Authority (AFCA), if your complaint is not resolved to your satisfaction within 30 calendar days of the date on which you first made the complaint or at any time:

AFCA can be contacted as follows:

Telephone: 1800 931 678

Email: [info@afca.org.au](mailto:info@afca.org.au)

Post: GPO Box 3 Melbourne VIC 3001

Website: [www.afca.org.au](http://www.afca.org.au)

Your complaint must be referred to AFCA within 2 years of the final decision, unless AFCA considers special circumstances apply. If your complaint is not eligible for consideration by AFCA, you may be referred to the Financial Ombudsman Service (UK) or you can seek independent legal advice. You can also access any other external dispute resolution or other options that may be available to you.

AFCA is an independent body that operates nationally in Australia and aims to resolve disputes between You and Your insurer. AFCA provides fair and independent financial services complaint resolution that is free to consumers. Determinations made by AFCA are binding upon Us.

This service is free of charge to policyholders.