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## COMPLAINTS RESOLUTION POLICY

of

**FSP Name & Number : smartMI (PTY) Ltd : 44497**

Trading as : smartMI (PTY) Ltd

Key Individuals Name & Surname : Mari van Rooyen  
Azille Nel

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Ownership of this policy belongs to smartMI (PTY) Ltd and has been adopted by the Key Individuals of the FSP.



\_\_\_\_\_  
Mari van Rooyen : 01/06/2013



\_\_\_\_\_  
Azille Nel : 01/06/2013

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### smartMI PROCEDURES

## PURPOSE OF THIS DOCUMENT

We are a licensed Financial Services Provider with the authority to provide financial advice and intermediary services in terms of the Financial Advisory and Intermediary Services Act. As such we have certain specific duties to you, our clients. One of these duties is to offer you a formal complaints resolution system, which will enable you to exercise your rights as provided for the Financial Advisory and Intermediary Services Act. The purpose of this document is to inform you of how you can make use of our complaints resolution system, to your advantage.

smartMI Pty Ltd is committed to a high service standard, rendering financial services with integrity, the speedy resolve of complaints and the overall improvement of processes even in the instance where a complaint may be viewed as 'invalid' in terms of the relevant policy wording. In this regard each and every concern counts as valuable feedback that requires addressing in a meaningful manner.

The object of this complaints resolution policy is to formalise the process in which dissatisfaction is lodged, acknowledged, investigated, resolved and leads to overall improvement/s.

It is furthermore important that each and every staff member receives extensive training in this regard, that this complaints resolution policy is made easily accessible to all policyholders, that this complaints resolution policy is continuously reassessed by senior management and that overall improvement/s are actioned as a consequence of feedback received from policyholders.

Important and guiding material / bodies include all six Treating Customers Fairly (TCF) Outcomes, the Financial Sector Conduct Authority (FSCA) and the Policyholder Protection Rules (PPR).

### 1. OUR COMPLAINTS MANAGEMENT MISSION

We are committed to providing our clients with quality service and undertake to manage the affairs of our clients in such a way that it would not be necessary to have complaints about our service, integrity and commitment. However should it happen that a client does have a complaint, we undertake to:

- a) Resolve client complaints in such a way that is fair to our clients, our FSP and our Staff.
- b) We undertake to inform all our clients of the procedures established for the internal resolution of their complaints, details of which will be given to them in writing.
- c) We undertake to ensure easy access to our complaints resolution process at our offices, or by way of post, e-mail or telephone.
- d) Empower and properly train the people in our FSP to deal with complaints, as well as with the escalation of non-routine complaints.
- e) If necessary, appoint an independent mediator to resolve the complaint to the benefit of both the client and our FSP.

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- f) Deal with complaints in a timely and fair manner, with every complaint receiving proper consideration in a process that is managed appropriately and effectively by the responsible staff member.
- g) Offer appropriate remedy in all cases where a complaint is resolved in favor of a client.
- h) Inform clients of their rights to refer their complaints to the Regulator, should a complaint not be resolved to their satisfaction within 15 working days from date on which the complaint was received.
- i) Maintain records of all complaints received for a period of 5 years, which will specify the outcome of all complaints lodged.
- j) If so required, implement follow-up procedures to:
  - i. Implement remedial actions to prevent similar complaints from occurring
  - ii. Improve services and procedures where necessary within the FSP

## 2. DEFINITIONS

### a) Complaint – what is a complaint :

- i. A Complaint in terms of the Policyholder Protection Rules (PPR) means an expression of dissatisfaction by a person to an insurer or, to the knowledge of the insurer, to the insurer's service provider relating to a policy or service provided or offered by that insurer which indicates or alleges, regardless of whether such an expression of dissatisfaction is submitted together with or in relation to a policyholder query, that -
  - ✓ the insurer or it's service provider has contravened or failed to comply with an agreement, a law, a rule, or a code of conduct which is binding on the insurer or to which it subscribes
  - ✓ the insurer or it's service provider's maladministration or willful or negligent action or failure to act, has caused the person harm, prejudice, distress or substantial inconvenience; or
  - ✓ the insurer or it's service provider has treated the person unfairly;
 Regardless whether submitted together with or in relation to a policyholder query.
- ii. All complaints lodged with the Ombudsman / FAIS / FSCA is to be dealt with by Guardrisk exclusively. All documents and information relating to such a complaint, must be sent to Guardrisk within 24hours of receipt of the complaint.
- iii. **Note that there is no service fee charged for registering a complaint.**
- iv. The Treating Customers Fairly (TCF) Outcomes include :
  - ✓ Customers need to feel confident that TCF is central to our culture;
  - ✓ Products are designed, marketed and sold to the right customer, meeting their needs;
  - ✓ Customers receive clear information that is timely and relevant to them;
  - ✓ Customers receive suitable product / sales advice that takes their circumstances into account;
  - ✓ Products and services perform as expected and the service is of an acceptable standard;

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- ✓ There are no unreasonable barriers for customers to change or switch products, claim or complain.

**b) Complainant – who may complain :**

- i. A complainant is a person who has a direct interest in the policy / service or someone acting on behalf of a person with a direct interest in the policy / service.
  - ✓ For example: a policyholder / a person that pays a premium, his / her beneficiary, a policyholder's spouse or registered dependents, a potential policyholder whose satisfaction relates to the relevant application, approach, solicitation, advertising or marketing material.

**c) Outcomes of a Complaint :**

- i. **Rejected** - complaint was rejected, and FSP regards the complaint as **finalised** after advising the complainant that FSP does not intend to take any further action to resolve the complaint. A formal repudiation letter with all complaint details will be sent. There are two variations of a rejected complaint:
  - ✓ **Invalid** - the complainant does not accept or respond to proposals to resolve the complaint within 7 days. This includes sending relevant documentation, acting upon the advice of FSP as well as not being able to reach the complainant via telephone, SMS and E-mail (if applicable);
  - ✓ **Unjustified** - the policy has been met, complainant has been treated fairly as far as possible, there is no legal leg to stand on to assist complainant, complainant refuses to accept outcome of merit assessment and nothing further can be done to assist complainant.
- ii. **Upheld** - complaint was successful either
  - ✓ **Wholly** (complainant got exactly what he / she was looking for);
  - ✓ **Partially** (complainant and FSP found middle ground).
- iii. There are also two variations of a wholly or an upheld complaint :
  - ✓ **Compensation Payment** - to compensate a complainant for a proven or estimated financial loss incurred as a result of the FSP's wrongdoing. This is either :
    - **Payment Contractually due** - the complainant should have received the assistance and be helped from the start, a justified complaint;
    - **Payment not Contractually due** - the complainant does not have legal standing or a legal argument, however, due to the poor handling by FSP in the form of negligence, FSP for example refunds the complainant his / her premiums and cancels the complainant.
- iv. **Goodwill Payment** - the complainant is not covered in terms of the policy, but FSP is willing and able to sponsor the matter due to extraordinary circumstances.

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**d) The Category/ Categories of Complaints :**

- i. The design of a policy or related service;
- ii. Information provided to the policyholders or lack of information and feedback provided to a policyholder;
- iii. Advice provided by the sales representative;
- iv. Policy performance and/ or servicing including negligence;
- v. Admin services such as premium collection;
- vi. Policy accessibility, ability to change or switch;
- vii. Complaints handling (complaint of a complaint);
- viii. Complaints relating to insurance claims, such as a rejection of a merit assessment for litigation (in-Court) cover;
- ix. Other complaints.

**3. SUBMITTING YOUR COMPLAINT**

Should you wish to lay a complaint with us, please follow the procedure as outlined below :

**a) If any of our representatives provided you with financial advice or any other intermediary service, and you feel that we or our representative :**

- i. Did not comply with the Financial Advisory and Intermediary Services Act and that you suffered financial prejudice as a result;
- ii. Intentionally or negligently gave financial advice or rendered an intermediary service to you which caused prejudice or damage or is likely to cause damage;
- iii. Treated the client unfairly.

**b) You must please submit the complaint in writing and forward it to our contact details indicated on the cover of this document. You can also submit your complaint to us verbally via telephone, via WhatsApp on 076 665 0393 or at one of our Branches. You will be assisted and guided from that point. Please include / provide the following details with your complaint :**

- i. Your name, surname and contact details
- ii. A complete description of your complaint
- iii. The name of the person who provided you with financial advice or an intermediary service;
- iv. The date on which the matter complained about occurred;
- v. All documentation relating to your complaint;

**How you would prefer to receive communication from us regarding your complaint i.e. by e-mail, fax or mail and please provide us with an email address, fax number or address where you would prefer to receive such communication.**

#### 4. OUR COMPLAINTS PROCEDURE

- a) As soon as we receive your complaint, we will send you an acknowledgement of receipt. Please take into consideration that the method of communication chosen by you will be determine how quickly we will receive and respond to your complaint.
- b) We will investigate and attempt to resolve your complaint to your satisfaction within 15 working days of receipt for your complaint.
- c) If we are unable to resolve your complaint within 15 working days, or are unable to resolve the complaint to your satisfaction, you have the right to complain to the Insurer, Ombud appointed specifically for this purpose or the Regulator.
- d) The contact details for escalation is as follows :

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i. GUARDRISK LIFE LIMITED :

Please ensure that you escalate the matter to Guardrisk Life Limited **before escalating your complaint to the Regulator** as the insurer, Guardrisk Life Limited needs to be given an opportunity to provide a determination.

Physical Address : 102 Rivonia Road, Sandown, Sandton, 2146  
Postal Address : PO Box 786015, Sandton, 2146  
Contact Details : T 0860 333 361  
F N/A  
E [complaints@guardrisk.co.za](mailto:complaints@guardrisk.co.za)  
W N/A

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ii. LONG TERM OMBUD CONTACT DETAILS :

Please remember that you must refer the complaint to the Ombud **within 6 months** from the date of the notice in which we inform you that we can not resolve the complaint to your satisfaction.

Physical Address : Third Floor, Sunclare Building, 21 Dreyer Street, Claremont, Cape Town, 7700  
Postal Address : Private Bag X45, Claremont, Cape Town, 7735  
Contact Details : T 021 657 5000 / 0860 103 236  
F 021 674 0951  
E [info@ombud.co.za](mailto:info@ombud.co.za)  
W [www.ombud.co.za](http://www.ombud.co.za)

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iii. FAIS OMBUD CONTACT DETAILS :

Please remember that you must refer the complaint to the Regulator **within 6 months** from the date of the notice in which we inform you that we can not resolve the complaint to your satisfaction.

Physical Address : Sussex Office Park, Ground Floor, Block B, 473 Lynnwood Road Cnr Lynnwood Road & Sussex Avenue, Lynnwood, 0081  
Postal Address : PO Box 74571, Lynnwood Ridge, 0040  
Contact Details : T 012 470 9080 / 012 762 5000  
F 012 348 3447 / 086 764 1422  
E [info@faisombud.co.za](mailto:info@faisombud.co.za)  
W [www.faisombud.co.za](http://www.faisombud.co.za)

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## 5. THE FSP'S RIGHT AND DUTIES

In terms of the Rules on Proceedings of the Office of Ombud for Financial Services Providers, 2002, the FSP has the following rights and duties :

- a) Where a complaint cannot be addressed within three weeks by the FSP, the FSP must as soon as reasonably possible after receipt of the complaint send to the complainant a written acknowledgement of the complaint with contact references of the respondent.
- b) If within 15 working days of receipt of a complaint the FSP has been unable to resolve the complaint to the satisfaction of the complainant, the FSP must inform the complainant that :
  - i. the complainant may refer it to the Office of the Ombud if the complainant wishes to pursue the matter; and
  - ii. the complainant should do so within 6 months of receipt of such notification.
- c) The FSP must be informed of the complaint submitted to the Office of the Ombud to the extent necessary to respond thereto fully.
- d) The FSP is entitled to submit any fact, information or documentation in relation to the complaint and must disclose relevant information or documentation to the Ombud.
- e) If deemed necessary by the Ombud, the FSP must discuss the complaint with the Ombud and furnish such further relevant information as the Ombud may require.
- f) The FSP is required to act professionally and reasonably and to cooperate with a view to ensure the efficient resolution of the complaint.

## 6. DETERMINATIONS BY THE OMBUD AND ITS LEGAL STATUS

- a) The Ombud may, when accepting a complaint in terms of section 27(5) of the Act, require the FSP to pay a case fee to the Office not exceeding R1000.00.
- b) If the complaint was not resolved through conciliated settlement, the Ombud will make a determination which has the legal status of a civil judgement of court.
- c) The determination can be a momentary award (not exceeding R800 000, unless the person complained against agrees to it), or any other order that can be made by a court .
- d) An award of costs may be made against the person complained against.
- e) An award of costs may be made against a complainant if the conduct of the complainant was improper or unreasonable, or if the complainant caused an unreasonable delay in the finalisation of the investigation.

## 7. APPEALS TO BOARD OF APPEAL

- a) It is possible to appeal to the Board of Appeal, provided the Ombud grants leave to appeal. If the Ombud refuses, the chairperson of the Board of Appeal can be requested for permission to appeal.

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- b) Application for leave to appeal must be made to the Ombud within 1 month if the Ombud's determination.
- c) If the Ombud refuses leave to appeal, application for leave to appeal may be made to the Chairperson of the Board of Appeal, within 1 month of the Ombud's refusal - the applicant must inform the Ombud of his application.
- d) Determination by the Board of Appeal has the same status as a judgement of a civil court.

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