

HANDLING YOUR COMPLAINT

Your feedback is important to us. Our aim is to provide you with quality products and consistently great service experiences. If you have a complaint about one of our products or about the service you have received either from us directly or from one of our partners or suppliers, we would like to hear about it and to have the opportunity to resolve it for you.

HOW WE WILL HANDLE YOUR COMPLAINT

If you have a complaint that relates to our products, services, or the conduct of our representatives such as our employees, loss adjusters, loss assessors, investigators, collection agents or claims team, please contact us.

When we receive your complaint we will:

- ✓ Acknowledge that we have received your complaint within 1 business day.
- ✓ Log your complaint and provide you with a complaint reference number.
- ✓ Keep you informed of the progress of your complaint at least every 10 business days (unless you agree on an alternative time frame).
- ✓ Provide you with the name and contact information of the person or team handling your complaint.
- ✓ Work with you to resolve the complaint as soon as we possibly can.

Our priority is to resolve your complaint as quickly and fairly as possible and to do this, it will be handled by a Primacy team member with the appropriate authority, knowledge and experience to address the concerns you have raised. This will not be the person whose decision or conduct is what your complaint is about.

Our complaints handling process has some specific steps as outlined below:

We will respond to your complaint within 30 calendar days of receiving it. We will respond in writing if:

- your complaint is about a declined claim, the value of a claim or about financial hardship;
- we haven't resolved your complaint to your satisfaction by the end of the fifth business day after your complaint was received by us; or
- you have requested a response in writing.

To assist us in resolving your complaint we will only ask for, and rely on, information that is relevant to our decision. If you ask us for this information, we will provide this to you within 10 business days.

While our aim is to provide you with a resolution to your complaint as soon as possible, if we are not able to make a decision or resolve your complaint within 30 calendar days, then before this deadline passes we will let you know the reasons for the delay and about your right to take your complaint to AFCA. Further information, and AFCA's contact details are provided in this brochure.

EXTERNAL DISPUTE RESOLUTION

We are part of an independent external dispute resolution scheme administered by the Australian Financial Complaints Authority (AFCA). The scheme is for customers and third parties as allowed under its rules. Its final determinations are binding on us.

For general insurance matters, you can take your Complaint to AFCA at any time, if you are unhappy with the complaint resolution, or if we do not resolve your Complaint within 30 calendar days after we first received your complaint. This applies even if we are still considering your complaint/dispute.

AFCA will not consider a complaint/dispute unless it is lodged before the earlier of the following time limits:

- within 2 years of the date of our final internal dispute review response; and
- within 6 years of the date when you first became aware (or should reasonably have become aware) that you suffered the loss.

However, AFCA may still consider a complaint/dispute lodged after either of these time limits if it considers that exceptional circumstances apply. Refer to AFCA website for more detail.

AFCA's contact details are:

The Australian Financial Complaints Authority

GPO Box 3 Melbourne VIC 3001

1800 931 678

www.afca.org.au

info@afca.org.au.

USE OF YOUR INFORMATION

We only ask for, and take into account, relevant information when deciding on your complaint/dispute. You can seek access to information about you that we have relied on in assessing your complaint/dispute and correct any mistakes or inaccuracies.

In special circumstances, we may decline to release this information, e.g. if it is protected from disclosure by law, including by privacy legislation, where a claim is being or has been investigated, where the release of it would prejudice us in relation to a dispute about your insurance cover or your claim or in relation to your complaint/dispute (subject to limited exceptions). However, we will not do so unreasonably and we will give you reasons and provide them in writing on request along with details of our complaints process.

Where an error or mistake in handling your complaint/dispute is identified, we will immediately initiate action to correct it.

PRIVACY COMPLAINTS

Our Privacy Policy also applies to the way we handle your personal information and it is available from www.pum.com.au/about/privacy/.

If you believe we have not met our privacy obligations you may lodge a complaint by contacting us. If we do not respond to your complaint within 30 days or if you are not happy with our response, then you have the right to take the matter to the Office of the Australian Information Commissioner. Their contact details are:

Office of the Australian Information Commissioner

GPO Box 5218 Sydney NSW 2001

1300 363 992

enquiries@oaic.gov.au



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