



prestigeresponse

## COMPLAINTS PROCEDURE

Prestige Response aim to provide all our clients with an excellent level of service at all times. We take any complaint about our services very seriously. If you do feel you have cause for complaint we will always try and resolve the problem as quickly as possible and to your satisfaction.

The information below sets out our complaints procedure and time targets to which we adhere.

### **What can I complain about?**

Our complaints procedure is designed to deal with complaints about the service we have provided you with through Prestige Response. It is not intended to deal with complaints about the terms of your insurance policy; this type of complaint should be directed to your insurer.

### **How do I make a complaint?**

You can make a complaint using the attached form or, if you prefer, you can write a letter setting out your complaint and providing your contact details. In either case please send it to the following address:

The Operations Director  
Prestige Response Ltd  
Estuary Business Park  
Henry Boot Way  
Hessle  
HULL  
HU4 7DY

Alternatively you can fax it to 01482 639301 or e mail [claims@prestigeresponse.co.uk](mailto:claims@prestigeresponse.co.uk)

If you require assistance completing the form, or prefer to discuss your complaint over the telephone, please contact The Operations Director on 01482 358882

### **What will happen with my complaint?**

Your complaint will be acknowledged within 5 working days of receipt. We aim to provide a full response to your complaint within 10 working days of receipt. If this is not possible we will write to you within 10 working days to inform you of our reasons and indicate when a full response can be sent. This must be within 8 weeks of receiving the complaint

### **What outcome can I expect?**

If we decide that redress is appropriate we will provide you with fair compensation for any acts or omissions for which we are responsible. Appropriate redress will not always involve financial redress but will always involve a written apology.

### **What if I am dissatisfied with the outcome?**

If you are unhappy about the way your claim has been dealt with, or you are unhappy with the outcome, you may appeal directly to the Claims Management Regulator. We will provide you with an address, telephone number and e mail address of the Regulator.



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## COMPLAINT FORM

Please provide as much information as possible. Boxes marked \* are compulsory to complete. You can print this form and complete it by hand or complete it online. Please remember to keep a copy for your records.

### **Your details**

SURNAME\*

FIRST NAME\*

TITLE (MR, MRS, MS, MISS etc)\*

ADDRESS\*

POST CODE\*

E MAIL ADDRESS

TELEPHONE NUMBER

DATE YOU COMPLETED THIS FORM\*

### **Details of Your Complaint**

DATE WHEN THE ISSUE AROSE\*

BRIEF DETAILS OF YOUR COMPLAINT\*

WHAT WOULD YOU LIKE THE OUTCOME TO BE, IF POSSIBLE?

Please return the completed form to the following address:

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