

POLICYHOLDER COMPLAINT FORM

If you have a complaint about insurance at Lloyd's, the Complaints team may be able to help you to resolve it.

For full details, please see www.lloyds.com/complaints. You can contact us for help or advice on 0207 327 5693 or e-mail complaints@lloyds.com

It will help us to deal with your complaint if you complete as much of this form as possible. If you do not know something, or it does not apply to you or your complaint, just leave it blank or write 'N/A' in the relevant section.

PLEASE COMPLETE IN BLOCK CAPITALS

ABOUT YOU

POLICYHOLDER DETAILS

Mr/Mrs/Ms
 First Name
 Surname
 Address

 Postcode
 Telephone No
 Email

REPRESENTATIVE ACTING FOR YOU*

Name
 Address

 Postcode
 Telephone No
 Email

*A representative can be a professional adviser or just a friend or family member. If you employ a professional to complain on your behalf you will have to meet their costs yourself.

IF YOUR COMPLAINT CONCERNS YOUR BUSINESS

Name of Business
 Group Annual Turnover €

ABOUT YOUR INSURANCE POLICY

Who did you buy your insurance from?

Name
 Address

 Postcode
 Telephone No
 Email

Type of insurance (e.g. Motor, Household etc.)

.....
 If Motor, please provide Registration Number

.....
 When did this insurance policy start?

Policy / Certificate Number

The Lloyd's syndicate which provides the insurance, if known

Please attach a copy of the policy certificate or schedule and any other relevant documents you may have.

ABOUT YOUR COMPLAINT

Who is your complaint against?

Does your complaint relate to a claim? YES/NO (circle as appropriate)

If YES, when did the claim occur? / /

Claim Number

THE FINANCIAL OMBUDSMAN SERVICE

To enable us to establish how to handle your complaint please could you confirm whether you have contacted the Financial Ombudsman Service (FOS) regarding this complaint?

YES/NO (circle as appropriate)

FOS Reference

PLEASE PROVIDE A SUMMARY OF YOUR COMPLAINT

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Please attach copies of any correspondence you have received relating to your complaint

WHAT RESOLUTION WOULD YOU LIKE?

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DATA PROTECTION

I would like the Complaints team to consider my complaint.

- I acknowledge that Complaints holds my personal data, including personal data ("Personal Data"), which I have provided.
- I consent to Complaints processing my Personal Data for the purposes of considering my complaint.
- I consent to my Personal Data being disclosed by the Complaints team to third parties for the purposes of considering my complaint.

.....
Policyholder Signature

..... / /
Date

.....
Representative Signature
(if applicable)

..... / /
Date

WHAT TO DO NEXT

Please return your completed form, together with any attachments to the address below.

Complaints
Lloyd's
Fidentia House
Walter Burke Way
Chatham Maritime
Kent
ME4 4RN

Telephone: (020) 7327 5693
Email: complaints@lloyds.com
Website: www.lloyds.com/complaints

We will contact you within 2 working days to confirm receipt and explain how we will handle your complaint.