



Sterling Insurance Group Limited

Complaints Procedure

Sterling Insurance Group Limited promises to make every effort to deal with your complaint fairly, promptly and courteously. It is inevitable that however well we seek to serve our customers, there will be occasions when customers are dissatisfied with our products and services. It is important to us that all customer complaints are investigated promptly and thoroughly, and that we learn from them in order to prevent recurrence.

Sterling Insurance Group Limited has therefore published this Complaints Handling Procedure. All our members of staff are aware of it and its purpose is to let you know how we will deal with your complaint.



When will we acknowledge your complaint?



Our aim is to fully resolve your complaint by the end of the next working day following the day it was received. If we are unable to do so, we will send you an acknowledgement within five working days of its receipt, giving full details of our complaints procedure. In our acknowledgement we will give you a name and job title of a complaints colleague whom you can contact should you need to discuss any aspect of your complaint further.



How will we investigate your complaint?



The person charged with investigating your complaint will conduct a full investigation and decide whether your complaint should be upheld or rejected. The investigation may include contacting you for further information and clarification.



How will we resolve your complaint?



When we have fully investigated your complaint, we will write to you, telling you whether your complaint has been upheld or rejected, and the reasons for our decision. This letter will be our final response to your complaint. If we decide that your complaint is upheld, we will give you details of any redress we propose to offer. Whatever our decision, we will also inform you that if you are dissatisfied with our final response, you may refer your complaint to the Financial Ombudsman Service. We will send you a leaflet with contact details and information about the Financial Ombudsman Service.



When will we get in touch?



We aim to resolve all complaints as quickly as possible, and at the latest, within 8 weeks of receipt.

4 weeks - If we are unable to resolve your complaint within 4 weeks of receipt, we will contact you and explain why we are not in a position to do so. We will also tell you that we will make further contact with you within the remainder of the 8 week period following the original receipt of your complaint.

8 weeks - If we are not able to resolve your complaint within 8 weeks, we will write to you again, explaining why and the reasons for the delay, and indicating when we should be able to provide you with a final response. At this stage we will also tell you of your right to refer your complaint to the Financial Ombudsman Service if you are dissatisfied with the delay and we will give you an explanatory leaflet about the Financial Ombudsman Service.

If you decide to refer your complaint to the Financial Ombudsman Service, it will not affect your legal rights.

This document and all our literature is available in large print, audio and Braille - if you would like this leaflet in Braille, in large print or on audio tape, please advise us and we will be happy to supply you with a copy.

