Springpoint Finance (Pty) Ltd

Complaint form

Policy/Contract number

Please fill in this form; attach all relevant documents and return to the address below

Complaints Resolution Department

Contact person	The Complaints Resolution Officer
Postal address	Suite 281, Private Bag x34, Somerset West, 7129
Physical address	Office F1 – 3 Triangle Point, 13 Urtel Crescent, Paardevlei, Somerset West, 7130
E-mail	complaints@springpointfinance.co.za
Tel	087 330 2562

Preferred method of communication for this complaint E-mail ☐ Post ☐

Please contact us if you have not received a response from us within three working days after you have submitted your complaint.
Please afford us an opportunity (maximum four weeks) to resolve the complaint before submitting this to the relevant ombudsman.

Information of Complaints Resolution consultant at Springpoint Finance

Name of person

Date of contact D D - M M - 2 0 Y Y

Complaint reference number / /

Section 1: Complainant details

Title Initial/s First name

Surname

Previous surname/s

Gender Male ☐ Female ☐ Correspondence language English ☐ Afrikaans ☐

Date of birth D D - M M - Y Y Y Y

Identity/Registration/Passport number RSA ID Yes ☐ No ☐

Postal address

Postal code

Residential address

Postal code

Telephone - work Fax - work

Telephone - home Cellphone number

E-mail address

Section 2: Financial Planner Details

Title Initial/s First name

Surname

Telephone - work Fax - work

Telephone - home Cellphone number

E-mail address

Section 3: Details of complaint

Please describe the circumstances that gave rise to your complaint. Use the following questions as a guideline to set out the relevant aspects of the complaint:

- Who provided the financial service?
- What financial service was provided?
- When was the financial service provided?
- Where was the financial service provided?

Insert extra pages if necessary.

Please write clearly, and explain the complaint, as well as your dissatisfaction with the service you received from the Financial Advisor.

Section 3: Details of complaint (continued)

Section 4: Required from Springpoint Finance (Pty) Ltd

Please state exactly what you expect from Springpoint in order to resolve your complaint.

Signed at

Signature of complainant **Date**