

THIRD SCHEDULE

(Made under regulation 51 (3))

COMPLAINT FORM

For official use only

Complaint Reference Number:.....

Date Received:

Date Determined:

A. Complainant's Details:

☐

Male

☐

Female

☐

25-34

☐

35-44

☐

45-54

☐

55-64

☐

65 and above

☐

Age: 16-24

Name of

Complainant:.....

Address:.....

.....

Telephone No.email:

B. Name of the Financial Service Provider against which the complaint is raised:

.....

Branch/Agent (if Applicable):

.....

C. Amount (in figures and words), if
any:.....

.....

.....

D. Brief statement of complaint and Remedy Sought:

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.....
.....

E. Supporting Documents:

F. Declaration:

I.....declare that the information provided herein is true to the best of my knowledge and belief and that I did lodge my complaint to my financial service provider whereupon the financial service provider failed onday of 20 to respond/resolve* the matter.

I also declare that this complaint is not subject of any pending or concluded proceedings in any court of law or tribunal.

Signed.....

Date.....

*Delete whichever is inapplicable