

ANNEX-VI-A

Complaint No. : [tdComplaint_No]

To,
The Insurance Ombudsman,
[tdCenter_address]
Re: Complaint against : [tdInsurance]
Branch/Division : [tdBranch]
Policy No. : [tdPolicyNo]
[Name_of_Complainant]

Being aggrieved, I am lodging complaint against the above referred Insurance Company.
Details are given as under :-

1. Complainants full Name and Address

Name : [Name_of_Complainant]
Address : [Full_Address]

Telephone No. : [Telephone No.]

LandLine No. : [LandLine_No]

Mobile No. : [Mobile_No]

Relationship to the [tdRelationship]
insured Person :

2. Name of the [tdInsurance]
Insurance Co. :

Office address : [Insurance_Off_Address]

Division / Branch : [tdBranch]

3. Policy Number : [tdPolicyNo]

4. Subject Matter of
complaint and brief
facts of the case :

5. Date of preferring
your claim/
complaint
to the office (please
enclose copy of the
letter) :

6. Date of reply of
Insurance company.

(please enclose a copy of the letter :

7. Are any proceedings before any Court/ Consumer Forum/ Arbitrator on the same subject matter pending or were so earlier :

8. Nature and extent of monetary Loss, if any, (In case of General Insurance cases only) :

9. Quantum of relief sought :

10. (a) Particulars of representation made against repudiation of claim to DO/ RO/ ZO/ Grievance Cell and outcome thereof :

(b) If not made representation give reasons , if any :

11. I hereby declare and solemnly affirm that

- a) The information given above is true to the best of my knowledge and belief .
- b) The complaint was lodged with the Insurance Company on [dtcomplaintDate] as per copy enclosed and the company has rejected my claim/ complaint/ not replied even after a month/ replied on [dtrepliedonDate] but the same is not acceptable to me.
- c) The period of one year has not elapsed from the date of rejection letter or final from the Insurance Company.
- d) The complaint is not on the same subject matter for which any proceedings before any court or consumer forum or arbitrator are pending/ settled or were so earlier.
- e) The subject matter is not decided earlier by your office or any office of the insurance Ombudsman .

12. I/ We enclose copies of the following documents:

1. Copy of complaint letter written to the Insurance Company.
2. Copy of reply received from the said Insurance Company.
3. Copy of reminder , if any.

Yours faithfully,

(Signature of the Complainant)

To,
The Insurance Ombudsman,
{tdCenter_address}

Dear Sir,

Re: Complaint against : {tdInsurance}
Branch / Division : {tdBranch}

Policy No. : {tdPolicyNo}

Name : {Name_of_Complainant}

Your Reference : {tdComplaint_No}

With reference to your letter dated {letter_date_of_annex_6} on the above subject. I/ We here by give my/our unconditional and irrevocable consent for the Insurance Ombudsman to act as a mediator, between the Insurance Company and myself and give his recommendations for the resolution of complaint.

Kindly give your recommendation at the earliest.

Yours faithfully,

(Signature)