

Complaints Handling Procedures FEC Mutual Limited (FEC)

What is a complaint?

A complaint is defined by the Financial Conduct Authority (FCA) as:

“any oral or written expression of dissatisfaction, whether justified or not, from, or on behalf of, a person about the provision of, or failure to provide, a financial service or a redress determination, which:

- a. alleges that the complainant has suffered (or may suffer) financial loss, material distress or material inconvenience; and
- b. relates to an activity of that respondent, or of any other respondent with whom that respondent has some connection in marketing or providing financial services or products, which comes under the jurisdiction of the Financial Ombudsman Service.”

Our commitment to you

We treat all complaints fairly and consistently to promptly determine the subject matter of the complaint and what action we need to take.

All complaints will be investigated by a suitably competent member of our team. Wherever possible, this responsibility will be allocated to a person who was not directly involved in the matter that is the subject of your complaint. The member of staff, usually a director within our Managers (Tower Insurance Brokers Limited) will either have the authority to settle your complaint or will have ready access to someone who has the authority.

For complaints, the FCA has set a time limit, of 8 weeks, for complaints to be investigated and addressed in a full written response. We aim to resolve and respond to complaints, as follows:

1. We will try to resolve your complaint quickly and where possible informally within 3 business days following receipt (this will be followed up with a written response in the form of a Summary Resolution Letter). This SRL will:
 - a. refer to the fact that you have made a complaint, inform you that we consider the complaint to have been resolved and detail any agreed action that will be taken (if any).
 - b. inform you of the Appeal’s Process (if applicable).
2. If we’re unable to resolve your complaint informally we’ll send you a written acknowledgement within 5 business days of receipt. This letter will inform you of your dedicated contact throughout the complaint. To help us make the right decision we may require further information; if we do we’ll let you know.
3. We aim to provide a full response to formal complaints within 20 business days of their receipt. Some complaints can take longer to investigate and if more time is needed we will let you know. In such cases, a full written response will be provided to you within 8 weeks.

You may contact us during our formal investigation. If the member of staff handling your complaint is not available, another member of our team will be able to help you.

We decide what remedial action or redress (or both) may be appropriate, considering all relevant factors.

We will take appropriate steps to keep you informed of the progress of the measures we are taking to resolve the complaint.

By the end of eight weeks after receipt of your complaint, we will send you:

EITHER

- A final response which:
 - accepts your complaint and, where appropriate, offers redress or remedial action; or
 - offers redress or remedial action without accepting the complaint; or
 - rejects the complaint and gives reasons for doing so

We will also

- Inform you of the next steps open to you as a Mutual Member if you remain dissatisfied with our position.

OR

- A response which:
 - Explains that we are still not in a position to make a final response, giving reasons for the delay and indicating when we expect to be able to provide a final response
 - Informs you of what steps you can take if you are unhappy with the delay in receiving a formal response.

Ending the complaint

You may accept our response and/or withdraw your complaint at any time during this process, even if we have not yet issued a final response. We ask that you confirm this in writing.

If we cannot resolve your complaint

Our final response letter will inform you of the next steps available to you if you remain dissatisfied with our response. As the Mutual is discretionary in nature and therefore operates outside of the FCA's jurisdiction you will not have access to the Financial Ombudsman Service to escalate your complaint. Potential options open to you include:

1. Appealing the decision to the Mutual's Board
2. Legal Action
3. Independent Arbitration (where the Mutual agree to this course of action).

If the matter to which your complaint relates is the responsibility of another firm (**for example our Protection Provider or Third Party we have used**), we will pass details to them, in writing, within five business days of receipt of your complaint and write to you to advise you of this.