

Provider complaint form



QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239 545

Please contact our Customer Care Unit on 1300 650 503 if you have any questions about the process or if you require assistance to complete this form. Office hours are 9am to 5pm (AEST) Monday to Friday. Calls from mobile phones, public telephones or hotels may attract additional charges

Date complaint was raised to you: Policy number or claim number related to this complaint:

Please complete all sections:

Your details					
<i>Please complete this if you are an Authorised Representative</i>					
Who are you?		ASIC Reference Number:			
Organisation name					
	<i>Title</i>	<i>Surname</i>	<i>Given name(s)</i>		
Name of contact person					
Postal address				State	Postcode
Contact phone	()	Mobile	()		
Email					
<i>We will use this email address for all written communication unless you advise us otherwise below</i>					
Preferred method of contact: Phone Email Post					

Customer details					
	<i>Title</i>	<i>Surname</i>	<i>Given name(s)</i>		
Customer name					
Physical address				State	Postcode
<i>Please enter postal address if different from physical address</i>					
Postal address				State	Postcode
Contact phone	()	Mobile	()		
Email					
<i>We will use this email address for all written communication unless you advise us otherwise below</i>					
Preferred method of contact: Phone Email Post					

Please complete for individual customer only:				
Date of birth		Gender		Aboriginal and Torres Strait Islander:

Please complete for business customer only:	
Business name	Is customer operating a small business? Yes No

A small business is where the number of employees is 100 or less

Additional details				
Is the customer experiencing vulnerability?	Yes	No	If 'Yes', what is the vulnerability?	
Is a language interpreter required?	Yes	No	If 'Yes', what is the language?	
Please provide any other information that is important for us to know about the customer				

Complaint details			
What is the product the complaint relates to?		If other, please specify:	
Complaint type	Claims	Sales	Financial hardship application
Complaint category			
Please enter a description of the complaint			
If applicable, what is the amount in dispute?		\$	

Resolution details			
Have you resolved this complaint with the customer?	Yes	No	
If No, what is the customer's desired outcome of this complaint?			
If Yes:			
What is the outcome of the complaint?			
When was the complaint resolved?		How much money was paid to resolve the complaint?	\$
Has the customer requested a response in writing?	Yes	No	
If applicable what date did you provide the customer with a response in writing?			
Please email a copy of the response to complaints@qbe.com			

Privacy consent notice
<p>Our Privacy Policy describes how we collect, disclose, store and use personal information as well as how to access it, correct it or make a complaint. When we say personal information we may also mean sensitive information such as health information, criminal history or professional memberships that's relevant to us issuing, administering or managing products or providing services and the terms on which we will do these things. We use personal information to issue, administer and manage products and provide services. You can view our Privacy Policy at www.qbe.com.au/privacy, or to obtain a copy by phoning us on 133 723 or requesting it from our authorised representatives or service providers. We may share your information with other QBE Group companies, our authorised representatives and service providers, each of which may be based outside of Australia.</p> <p>By giving us personal information you consent to us collecting, disclosing, storing and using personal information in accordance with our Privacy Policy. If you give us someone else's personal information you confirm that you've obtained their consent to do so. If you don't provide all of the personal information we've requested, we may be unable to issue, administer and manage products and provide services.</p>

Submitting your complaint
Please send this completed form within 2 days of the complaint being raised and any attachments to complaints@qbe.com