

**Policy on Grievance Redressal**  
**Mechanism for Insurance**

## **I. PREFACE**

Complaints are an opportunity for an organization to understand or identify gaps in any mechanism, product or communication, work towards mechanism improvements as well as cement relationship of the Company with unsatisfied customers. Complaint handling mechanism is part of the customer care initiative.

IRDAI has recently notified the Registration of Corporate Agent Regulations, 2015 which prescribes that every corporate agent shall have in place proper procedures and effective mechanism to address complaints/grievances of policyholders efficiently and with speed.

The purpose of this Grievance Redressal Mechanism (hereafter referred to as the 'Mechanism') is to set forth the policies and procedures to be followed in receiving, handling and responding to any complaint/grievance by the Corporate Agent. This mechanism encompasses complaints relating to all products serviced by corporate agents on behalf of different insurers.

Further, it shall be the Corporate Agent's guiding principle to provide prompt and fair resolution of customer complaints in accordance with all legal and regulatory guidelines. It is imperative that the policies and procedures outlined in this mechanism be fully understood and diligently followed by all employees of Corporate Agent who are involved in customer complaint handling mechanism.

## **II. Grievance Redressal Mechanism**

### **Classification of Complaints, Inquiry and Request**

**'Inquiry'** is defined as any communication from a customer for the primary purpose of requesting for information about the Company or its services.

**'Request'** is any communication from a customer soliciting a change/modification in the policy.

### **'Grievance/Complaint'**

Communication or expression of dissatisfaction may be received either verbally or in writing expresses a grievance from or on behalf of a customer could be about:

- An action or lack of action;
- The standard of service/deficiency of service;
- any business practices followed by the corporate agent;
- anything that does not fall in either Inquiry or Request

### **'Complaint' versus 'Inquiry'/'Request'**

A 'complaint' needs to be clearly differentiated from 'inquiry'/'request'. Not every contact by a customer/policyholder questioning an action will constitute a complaint. Differentiating a complaint from an inquiry/request involves a reasonable application of judgment. The distinguishing factor should be the tone of the communication and a reasonable interpretation of it. If the tone is critical and the customer sounds unhappy or displeased about something, the communication should be treated as a 'complaint'.

A complaint includes allegations of some form of mis-selling, non-delivery of the policy, churning/twisting, failure to properly advise, misrepresentation or unsuitability of the product, delays in processing any client request like address change/premium payment/change in policy features, etc.

### **III. Appointment of Grievance Redressal Officer**

A responsible officer of the Company shall be nominated as the Grievance Redressal Officer as follows:

**Ms. Pratibha Sharma**

**(Nodal Officer)**

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201-202, 2nd Floor, Southend Square

Mansarovar Industrial Area, Jaipur-302020

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### **IV. Approach towards 'Service requests' and 'inquiries'.**

All 'Service Requests' and 'Inquires' should be resolved as expeditiously as possible and the turnaround time should not exceed the timelines as provided in IRDAI (Protection of Policyholder's Interest) Regulation, 2002 and any other regulations / circulars / communications prescribed by IRDAI from time to time.

In case the Service Request or Inquiry requires intervention of the Insurance Company, the same should be forwarded to the insurance company within 3 working days from the date of receipt of such 'Service Requests' and 'Inquiries'.

A register containing details of all the 'Service Requests' or 'Inquiry' should be maintained. The register should contain the name of the policy holder or the person making the inquiry, nature of enquiry or service request, details of policy issued/solicited and action taken thereon.

#### **V. Complaint Resolution Process:**

The Company shall institute appropriate mechanism and procedure under the purview of this Policy to address the grievance of Customers to be approved and amended by the Board of Directors from time to time as and when required as follows:-

##### **Step 1-**

The Complainant is advised to visit the nearest Aavas branch and submit his/her complaints/ grievances and get the complaint logged in the "Complaint Register" maintained at the branches for the same during the working hours.

We will investigate the complaint comprehensively, diligently and impartially and respond with the remedial action to the complainant within 14 working days.

##### **Step 2-**

If the Complainant is still not satisfied with the resolution he/she receives or don't receive any response within 14 working days he/she can write, email or call to Nodal Officer of the Company designated as Grievance Redressal officer.

After examining the matter, we shall send the complainant our final response or explain why it needs more time to respond and shall endeavor to do so within 14 working days.

##### **Step -3**

In case the complaint requires intervention of the Insurance Company, the same should be forwarded to the Insurance Company within 3 working days from the date of receipt of such Complaint. The Complainant should be informed about the status.

#### **VI Review of the Policy**

The Company shall institute appropriate mechanism and procedure under the purview of this Policy to address the grievance of Customers, and the policy to be amended by the Executive Committee of the Board of Directors from time to time as and when required and reviewed by the Board of Directors in their meeting once in a year.

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Date of approval by the Board: **October 26, 2017**

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