

# Complaint Form

Send to us at: **Credit Ombudsman Service – Case Management**  
 Fax: 02 9273 8440 Mail: PO Box A252, Sydney South NSW 1235

This form will enable us to collect and use information needed for us to assess and investigate your complaint.

Please complete the relevant fields and ensure that all relevant persons (e.g. a joint account holder) sign and date the disclosure statement on page 4.

If you require assistance in completing this form, please call us on 1800 138 422 between 9.00am – 5.00pm Monday to Friday AEST (excluding public holidays).

Please also attach all information relevant to your complaint, e.g. emails, letters, agreements.

To view a copy of our Rules or, alternatively, to lodge your complaint online, please visit [www.cosl.com.au](http://www.cosl.com.au).

## Complainant Details

### Personal

#### Main Complainant

#### Second Complainant

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Title</i>	<i>First name</i>	<i>Title</i>	<i>First name</i>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Last name</i>		<i>Last name</i>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Date of birth (dd/mm/yy)</i>		<i>Date of birth (dd/mm/yy)</i>	

The Main Complainant will be our primary point of contact. If you have a person representing you, such as a relative, friend or lawyer, please complete page 5.

### Address

#### Residential

#### Postal

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>State</i>	<input type="text"/>	<i>Post Code</i>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>State</i>	<input type="text"/>	<i>Post Code</i>	<input type="text"/>

### Contact

Business	<input type="text"/>	Facsimile	<input type="text"/>
Mobile	<input type="text"/>	Home	<input type="text"/>
Email	<input type="text"/>		
	<i>(If you provide us with an email address, we will correspond with you by email.)</i>		

Do you need an interpreter to assist with your complaint?  Yes  No

*If you cannot complete the Complaint Form in English, you may either ask someone you trust to assist you or we can arrange for an interpreter at no cost to you.*  *Language*

What other assistance do you need?

*E.g. learning, vision or hearing disability*

Are you of Aboriginal or Torres Strait Islander origin?  Yes  No



## About Your Complaint

Are you submitting the complaint on behalf of a business?

Yes  No

Name/s on the account:

Account Number/s:

Has your complaint been, or is your complaint being, dealt with by a court, tribunal, arbitrator or the Financial Ombudsman Service?

Yes  No

What is the name of the person or business you are complaining about?

(We refer to this person or business as the Member.)

What is the name of the person or business you originally dealt with?

When did the events causing the complaint first occur?

/ /

Have you asked the Member to look at or resolve your complaint?

Yes  No

When did you first approach the Member about resolving your complaint?

/ /

Have you received a response to your complaint?

Yes  No

If so, when did you receive the response?

(Please be sure to include a copy of the response when you lodge your complaint.)

/ /

What was the product or service you received?

(e.g. loan, car lease, investment advice, savings product, insurance)

What was the purpose of this product?

(e.g. loan to refinance, purchase property or renovate, financial planning, savings, investing or insuring)

What amount of loss, if any, are you seeking as compensation?

\$

We can only deal with a complaint if the loss claimed is less than \$500,000. However, we can only award compensation of up to \$250,000. If your loss is less than \$500,000 but greater than \$250,000, do you wish to continue?

Yes  No

How did you hear about the Credit Ombudsman Service?

E.g. Office of Fair Trading,  
Financial Ombudsman Service ...

Are you experiencing financial hardship?

Yes  No

Has the lender started court action or repossession?

Yes  No

If yes, please provide details:



## Complaint Details

If you have any difficulty in presenting your complaint, we will help you prepare it. In doing so, we will not "take sides" but will simply help you present your complaint as clearly and concisely as possible.

### Complaint details

Summarise your complaint below by giving us a brief description of what has occurred, when this occurred and who you feel is responsible.

Do you have any supporting documentation?

Yes  No

If so, please provide us with a copy – do not send originals.

Documents you may wish to provide include any agreements, loan documents, product disclosure statements, application forms, broker contract, bank statements, receipts, statements of advice, correspondence, emails, telephone records, advertisements, etc.

What do you consider to be a fair and reasonable settlement of your complaint?

You may wish to supply additional pages to your complaint and your desired resolution. Please attach these to your complaint form.



Disclosure Statement

Main Complainant

Second Complainant

I/We:



authorise the Credit Ombudsman Service to forward my/our complaint and supporting documents to:

*(Please insert above the name of the person or company you are complaining about)*

You acknowledge and agree that by signing this document, you authorise:

- a) us to collect, keep, use, correct and disclose information about you or the complaint;
- b) the person you are complaining about to give us such information about you or the complaint that we may request or which they may otherwise provide us; and
- c) us to give information about you or the complaint to another external dispute resolution scheme approved by the Australian Securities and Investments Commission ('ASIC') if we consider that it is more appropriate for the other scheme to deal with the complaint.

We will only use the information about you or the complaint to review and investigate your complaint and, as part of our normal activities, we may disclose information about you:

- a) to the person you are complaining about;
- b) to a government or regulatory authority such as ASIC;
- c) to another ASIC-approved external dispute resolution scheme; and
- d) in accordance with compulsory legal process such as a Court "subpoena" ('primary purpose').

We do not engage in direct marketing activities and will not provide your personal information to anyone for that purpose.

Main Complainant

Second Complainant

Signature

Signature

Date

Date

**NOTE**

*In accordance with the Credit Ombudsman Service Rules, all statements you make and information or documents you provide us are on a "without prejudice" basis. This means that nothing said or done or information provided during the COSL Process can be used in later legal proceedings.*

**Your Privacy**

We will only use or disclose your personal information for a purpose other than the primary purpose if:

- the secondary purpose is related to the primary purpose (and if this is sensitive information about you, directly related to that primary purpose), and you would reasonably expect us to use or disclose the information for that secondary purpose; or
- you have consented to the use or disclosure; or
- we reasonably believe that the use or disclosure is necessary to lessen or prevent a serious and imminent threat to someone's life, health or safety or a serious threat to public health or public safety; or
- we have reason to suspect that unlawful activity has been, is being, or may be engaged in, and we use or disclose that information as a necessary part of reporting our concerns to relevant persons or authorities such as the Australian Securities and Investments Commission.

A copy of our full privacy policy is available at [www.cosl.com.au](http://www.cosl.com.au) or by calling us on 1800 138 422.



## Third Party Authority

Optional authority where you want another person to represent you in managing your complaint to COSL.

**Main Complainant**

**Second Complainant**

I/We:

authorise:

to act on my behalf in this matter.

**Contact Details**

Contact Name

Company Name

Address

State  Post Code

Business  Facsimile

Email

You acknowledge and agree that by signing this authority, you authorise us to disclose any information relevant to your complaint to the person you have authorised to represent you.

**Main Complainant**

**Second Complainant**

Signature

Signature

Date

Date

**NOTE**

*All correspondence will be with the person you have nominated above.*

*If we cannot get in contact with the person you have nominated above then we will contact you using your preferred contact method.*

