



ZURICH[®]

General Insurance Factsheet

Zurich is committed to customer service and is a member of the Insurance Council of Australia and a signatory to the General Insurance Code of Practice.

The Code applies differently to Retail Insurance¹ and Wholesale Insurance, as defined in the Code and the Code establishes a number of standards including those in relation to Retail Insurance set out below. All customers should consider the information below relating to external dispute resolution arrangements, set out in the Complaints Resolution Process section.

Resolving your Claim

In the event of a claim, we will:

- accept or deny your claim and notify you within 10 business days if we do not require further information, assessment or investigation;
- notify you within 10 business days of receiving your claim of the further information we require to decide on your claim;
- if necessary, appoint an assessor, adjuster or investigator and advise you of their appointment within 5 business days;
- keep you informed at least every 20 business days of the progress of your claim. We will review your claim once we do not require further information, assessment or investigation unless we advise you otherwise. We will accept or deny your claim within 10 business days of those conditions being met;
- make a decision within 4 months of receiving your claim or 12 months under Exceptional Circumstances as set out in the Code;
- notify you if these timeframes are not practical for your claim and seek to agree on alternative timeframes with you.

If we are unable to meet these timeframes, agree alternative timeframes or agree on a hardship application or payment, you may make a complaint under our complaints resolution process, outlined below. In the event of your claim being declined, we will provide you with written reasons for our decision and you can request a copy of the information that we have relied upon in assessing your claim, including reports from external third parties.

¹ Retail Insurance refers to certain motor vehicle, home building, home contents, sickness and accident, consumer credit, travel and personal and domestic property insurance provided to, or to be provided to an individual or for use in connection with a Small Business as set out in the Code.

Complaints Resolution Process

If you have a complaint about your claim or the service you have received from us, please contact us directly on 132 687 or write to us at:

Zurich Australian Insurance Limited
PO Box 677 North Sydney, NSW 2059

In a number of circumstances where you don't require a written response, we will resolve your complaint within 5 business days.

Where we are unable to resolve your complaint in that way, we will respond in writing to your complaint within 15 business days, if we have all the information required. If we cannot meet this timeframe because additional information or investigation is required, we will notify you within those 15 business days and seek to agree an

alternative timeframe with you. We will keep you informed of the progress of your complaint at least every 10 business days unless otherwise agreed.

If you are not satisfied with our response or we cannot agree an alternative timeframe, you may have the matter reviewed through our internal complaint review process, which is free of charge. If you request your complaint to be reviewed and we have all the information required, we will respond, in writing within 15 business days. If we cannot meet this timeframe because additional information or investigation is required, we will notify you within those 15 business days and seek to agree an alternative timeframe with you. We will keep you informed of the progress of your complaint at least every 10 business days.

We subscribe to the independent external dispute resolution scheme administered by the Australian Financial Complaints Authority (AFCA), which is available to customers and third parties who fall within the AFCA Complaint Resolution Scheme Rules².

If our decision on your Complaint does not resolve your Complaint to your satisfaction, or if we do not resolve your Complaint within 45 calendar days of the

² In relation to general insurance products, AFCA can consider certain complaints that relate to:

- Retail General Insurance Policies;
- Residential Strata Title Insurance Products;
- Small Business Insurance Products;
- Medical Indemnity Insurance Products; or
- Title Insurance Policies,

(each as set out in AFCA's rules) amongst other complaints, which will cover a range of complaints raised by individuals and small businesses with less than 100 employees.

date we first received your Complaint, you may refer your Complaint to AFCA.

If you wish to do so, you should refer your Complaint to AFCA as early as possible, as time limits can apply.

If AFCA advises you that AFCA cannot assist you, you can seek independent legal advice or access any other external dispute resolution options that may be available to you, for example by contacting the Department of Fair Trading, your Solicitor or Local Court as you may be able to have the matter resolved by:

- Small Claims Court or Tribunals
- Formal legal proceedings out of the District or Supreme Courts
- Mediation

Contact details for AFCA are:

Online: www.afca.org.au

Email: info@afca.org.au

Phone: 1800 931 678

Mail: Australian Financial Complaints Authority
GPO Box 3
Melbourne VIC 3001

For full details of the Code, please read the Code which is available on www.codeofpractice.com.au

Zurich Australian Insurance Limited

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Client enquiries: Telephone 132 687, www.zurich.com.au