

DATE SUBMITTED:
(DD/MM/YYYY)

NAME:

CONTACT INFORMATION

Home Telephone:

Work Telephone:

Mobile Telephone:

Email Address:

Mailing Address:

COMPLAINT DETAILS

Policy/Claim Number (if applicable):

Nature of Complaint:

Delay when visiting office

Engineer

Follow up Procedure

Hardware

Software

Non Delivery of Promise

Professionalism

On Scene Call Delay

Settlement amount

Vendor:

Other:

Complaint Details:

SIGNATURE

Client Signature:

Date: (DD/MM/YYYY)

Witness Signature:

Date: (DD/MM/YYYY)

Forward completed form to:

Mrs. Annette McSweeney or Mrs. Abagale Butler
Complaint Administrators
Bahamas First Holdings Limited
32 Collins Avenue
P.O. Box SS-6238
Nassau, Bahamas

Attach any additional documents that will assist in resolving this matter.

PROVIDE CLIENT WITH A COPY OF THE COMPLETED COMPLAINT FORM