



Complaints Department

Global Benefits Group (UK) Ltd
2 Seething Lane
Floor 2
London
EC3N 4AT, UK

UK Complaints Form

UK Complaints Procedure

This form is for use by GBG UK Customers and customers insured by XL Catlin Insurance Company UK Limited (AXA XL)

At times, you may have a concern you would like to tell us about or disagree with a decision made regarding your coverage. You can make a complaint to get help for your situation.

Some of the most important factors in getting your complaint dealt with as quickly and efficiently as possible are:

- Be sure you are talking to the right person; and
- That you are providing the necessary information.

Using this form will help us to understand your concerns and provide us with information to investigate your complaint. For Full details of our Complaints Procedure please see <https://www.gbg.com/complaints-procedures>.

Making a Complaint

If your complaint relates to:

The sale of the policy you purchased or any information you were given during the sales process:

- a. If you purchased the policy using a broker or other intermediary, **please contact them first.**
- b. If you purchased the policy directly from us either from a local representative, using the website, or through a group plan of benefits, please contact us directly using this form.

Please send the completed form to: axaxlukcomplaints@axaxl.com



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A. INSURED INFORMATION		
Last Name:	First Name:	Middle Initial:
Policy #:	ID #:	
Date of Birth: (DD/MMM/YYYY, i.e., 23/NOV/1988)		
B. COMPLAINANT INFORMATION (If different from Section A)		
NOTE: If you are not the insured, claimant, or Provider of Service, please attach documentation showing you have legal authorization on the Insured's behalf, such as, but not limited to, a signed and dated letter of authorization, a legal power of attorney document, etc.		
Name:	Relationship to Insured:	
Address:		
Postal Code:	Country:	
Phone:	Fax:	
Email:		
C. COMPLAINT SUMMARY		
Please provide a summary of your complaint and any information that you think would assist us in reviewing your case. If more space is needed, please attach separate page(s).		



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D. SIGNATURE
Name:
Signature: By typing my name on this form I am signing electronically, and this electronic signature is the legal equivalent of my manual, handwritten signature.
Date:

Fair Processing Notice

This Privacy Notice describes how XL Catlin Insurance Company (UK) Limited (together, “we”, or “us”) collect and use the personal information of insureds, claimants and other parties (“you”) when we are providing our insurance and reinsurance services.

The information provided to us, together with medical and any other information obtained from you or from other parties about you in connection with this policy, will be used by us for the purposes of determining your application, the operation of insurance (which includes the process of underwriting, administration, claims management, analytics relevant to insurance, rehabilitation and customer concerns handling) and fraud prevention and detection. We may be required by law to collect certain personal information about you, or as a consequence of any contractual relationship we have with you. Failure to provide this information may prevent or delay the fulfilment of these obligations.

Information will be shared by us for these purposes with group companies and third party insurers, reinsurers, insurance intermediaries and service providers. Such parties may become data controllers in respect of your personal information. Because we operate as part of a global business, we may transfer your personal information outside the European Economic Area for these purposes.

You have certain rights regarding your personal information, subject to local law. These include the rights to request access, rectification, erasure, restriction, objection and receipt of your personal information in a usable electronic format and to transmit it to a third party (right to portability).

If you have questions or concerns regarding the way in which your personal information has been used, please contact: legalcompliance@axaxl.com.

We are committed to working with you to obtain a fair resolution of any complaint or concern about privacy. If, however, you believe that we have not been able to assist with your complaint or concern, you have the right to make a complaint to the Data Protection Authority.

For more information about how we process your personal information, please see our full privacy notice at: <https://axaxl.com/privacy-and-cookies>.

Brokers, Intermediaries, Partners, Employers and other Third Parties

If you provide us with information about someone else, we will process their personal information in line with the above. Please ensure you provide them with this notice and encourage them to read it as it describes how we collect, use, share and secure personal information when we provide our services as an insurance and reinsurance business.