

Name of the Insurer:

Date:

GRIEVANCE DISPOSAL

| SI No. | Particulars | Opening Balance * | Additions during the quarter (net of duplicate complaints) | Complaints Resolved | | | Complaints Pending at the end of the quarter | Total Complaints registered up to the quarter during the financial year |
|----------|--|-------------------------------------|--|--|---|---------------|--|---|
| | | | | Fully Accepted | Partial Accepted | Rejected | | |
| 1 | Complaints made by customers | | | | | | | |
| a) | Proposal Related | | | | | | | |
| b) | Claims Related | | | | | | | |
| c) | Policy Related | | | | | | | |
| d) | Premium Related | | | | | | | |
| e) | Refund Related | | | | | | | |
| f) | Coverage Related | | | | | | | |
| g) | Cover Note Related | | | | | | | |
| h) | Product Related | | | | | | | |
| i) | Others (to be specified) | | | | | | | |
| | (i) _____ | | | | | | | |
| | (ii) _____ | | | | | | | |
| | Total | | | | | | | |
| 2 | Total No. of policies during previous year: | | | | | | | |
| 3 | Total No. of claims during previous year: | | | | | | | |
| 4 | Total No. of policies during current year: | | | | | | | |
| 5 | Total No. of claims during current year: | | | | | | | |
| 6 | Total No. of Policy Complaints (current year) per 10,000 policies (current year): | | | | | | | |
| 7 | Total No. of Claim Complaints (current year) per 10,000 claims registered (current year): | | | | | | | |
| 8 | Duration wise Pending Status | Complaints made by customers | | Complaints made by Intermediaries | | Total | | |
| | | Number | Percentage to Pending complaints | Number | Percentage to Pending complaints | Number | Percentage to Pending complaints | |
| a) | Up to 15 days | | | | | | | |
| b) | 15 - 30 days | | | | | | | |
| c) | 30 - 90 days | | | | | | | |
| d) | 90 days & Beyond | | | | | | | |
| | Total Number of Complaints | | | | | | | |

- Note :- (a) Opening balance should tally with the closing balance of the previous quarter.
 (b) Complaints reported should be net of duplicate complaints
 (c) No. of policies should be new policies (both individual and group) net of cancellations
 (d) Claims should be no. of claims reported during the period
 (e) For 1 to 7 Similar break-up to be given for the complaints made by intermediaries.