

# Grievance Redressal

## Introduction

Aditsh Insurance Web Aggregator Private Limited (hereinafter referred as "The Company/AIPL") believes that excellence in customer service is the most important tool for sustained business growth. Therefore, the company follows a philosophy of providing best services and quick resolution of the customers' complaint/grievance in a manner that effectively resolves the complaint to customer's satisfaction.

## Objective

The objective of this policy is to provide efficient & effective grievance redressal mechanism to policyholders, nominees and other persons claiming under policies and has been formulated taking into account the following:

- Complaints raised by customers are dealt with courtesy and on time.
- Customers are treated fairly at all times.
- Complete transparency is maintained with the customers.
- All complaints are dealt with efficiency and fairness.
- Customers are fully informed about avenues to escalate their complaints / grievances within the organization.
- Customers are informed about their rights to alternative remedy if they are not fully satisfied with the response of the Company to their complaints.
- Recognize that our quality and business goals go hand-in-hand and have a Continual improvement of the customer complaint handling process through the use of various tools and information technology available for business process improvement.

## Scope

The policy shall cover all the complaints/grievances received from the policy holder/ its nominee/beneficiary/authorized person (with the written consent of the policy owner). The company will not accept any complaint from third party, agencies on behalf of the customer unless we have written consent from the policy holder.

Grievances received from consumer forums or ombudsman office or court will be dealt separately by the legal team.

Inquiry or Request are not covered under this policy.

## Definitions

"Complainant" means a policyholder or prospect or any beneficiary of an insurance policy who has filed a complaint or grievance against the insurer or the company

“Complaint” or “Grievance” means written expression (includes a communication in the form of electronic mail or other electronic scripts), if dissatisfaction by a complainant with insurer, company or other regulated entities about an action or lack of action about the standard of service or deficiency of service of such insurer, company or other regulated entities

Explanation – An inquiry or request would not fall within the definition of the complaint or grievance.

An Inquiry and Request would mean the following:

An “Inquiry” is defined as any communication from a customer for the primary purpose of requesting information about a company and/or its services.

A “Request” is defined as any communication from a customer soliciting a service such as a change or modification in the policy

### **Complaint Redressal Process**

If you have a grievance that you wish to redress, you may contact us with the details of your grievance through any of the following channels:

Step 1 : Channel for communication

- Email : [adfpolicy@aditsh.com](mailto:adfpolicy@aditsh.com) or
- Letter: Grievance Officer 312A Tower B Ithum Building A 40 Sector 62 Noida 201309. or
- Contact Centre : Customer can call us on 9289721796 from 10.00 am to 7.00 pm Monday to Sunday (excluding public holidays) or

Step 2 : Process for addressing the queries

- All grievances will be given acknowledgment receipt within 24 working hours of the receipt of complaint.
- All couriers will be answered within 14 days from the date of receipt.
- All grievances from walk in customer will be acknowledged immediately and log shall be maintained in this regard.
- Based on type of grievance, the company shall exercise all efforts to resolve the same within 14 working days from the date of receipt of complaint.
- Once the complaint is resolved, a closure mail shall be sent to the customer with the request of rating the same.

Step 3: Escalation Matrix

If a client is not satisfied with the resolution provided through various channels, the client has the option to escalate the issues to a higher level, as per the escalation matrix given underneath

- Level 1: In case the customer is not satisfied with the decision or has not received any response within 14 working days, he/she may escalate the matter to Grievance Redressal Officer, Ms. Somprabha Agnihotri at [grievance@aditsh.com](mailto:grievance@aditsh.com).

- Level 2: If still not satisfied after level 1, please escalate the matter to the Principal Officer at [PO\\_ADFPOLICY@ADITSH.COM](mailto:PO_ADFPOLICY@ADITSH.COM).
- Level 3: If after having followed Level 1 and Level 2 your issue remains unsolved, you may approach The Insurance Regulatory Development Authority of India (IRDAI) at <http://www.policyholder.gov.in/report.aspx#> or Ombudsman at <http://www.ecoi.co.in/procedure.html> respectively, The maximum limit for the amount under dispute for which the Ombudsman can entertain a complaint is upto Rs. 30 lakhs

#### Step 4: Resolution of Grievances

AIPL endeavors to resolve all grievances to the satisfaction of the customers. In order to ensure fair resolution for the customer, the Regulator has set conditions for treating the grievances as closed. As per IRDAI regulations, a grievance shall be considered as disposed-off and resolved:

- When AIPL has acceded to the request of the complainant fully. or
- Where the complainant has indicated in writing, acceptance of the response of the company. or
- Where the complainant has not responded to the Company within 8 weeks of the Company's written response.