

Complaint Handling Policy

July 2024

Travel Money (NZ) Limited

Company Number 2095926

FSP 37249

Phone: 0800 732 294

Email: customerfeedback@travelmoney.co.nz

Website: www.travelmoney.co.nz

1. Introduction

At Travel Money (NZ) Limited ("TMNZ"), we are committed to providing superior service to all our clients. We understand that from time to time, clients may have concerns or issues that need to be addressed. Our Complaint Handling Policy is designed to ensure that all complaints are taken seriously, handled promptly, and resolved in a fair and transparent manner. This Complaint Handling Policy ("Policy") outlines our procedures for managing complaints to meet the needs of our clients and comply with regulatory requirements.

2. Definition

TMNZ classifies a complaint as an expression of dissatisfaction made to TMNZ related to its products or services where a response or a resolution is explicitly or implicitly expected.

3. Responsibility

The regional leader shall be responsible for handling and escalating complaints.

4. Objective

The objective of this Policy is to ensure that:

- Complaints are taken seriously and are dealt with in a timely manner;
- Clients are treated fairly, politely, and respectfully;
- The resolution of the complaint is fair, open and transparent; and
- Complaints are not ignored or kept secret.

5. Procedure

To facilitate a structured complaint process and ensure all relevant details are captured efficiently, customers are encouraged to use the Complaint Form for submitting formal complaints. This form is detailed to gather comprehensive information about the complaint, which assists in its resolution.

Clients may submit their complaints by completing the Complaint Form provided at the end of this Policy and/or email using any of the following options:

Email: customerfeedback@travelmoney.co.nz

Postal Address: Level 4, 124 Vincent Street, Auckland 1010

- 1. Upon receiving the Complaint Form, a written acknowledgement will be sent to the customer within 2 business days.
- 2. The form ensures that all necessary information is included, which aids the regional leader in resolving the complaint swiftly and effectively.
- 3. If required, additional documentation may be requested to fully address the complaint.
- 4. A final response should be provided to the customer within 60 business days from the date the complaint was submitted to TMNZ.

5 Escalation/No Outcome

- a) Should the complaint not be resolved at a regional leader level, the regional leader will escalate, and the complaint brought to the attention to the Head of Retail to contact the Client for resolution; and/or Regional leader will escalate the complaint brough to the attention of the General Manager of Travel Money.
- b) In the case when the complainant is still not satisfied with TMNZ's final response, then the complainant can refer the complaint, with a copy of TMNZ's final response, to the FSCL.

6 If Client is not satisfied with the outcome

- a) If the Client is not satisfied with the outcome, the client will be referred to contact Financial Services Complaints Limited (FSCL).
- b) FSCL is the independent external dispute resolution scheme, there is no cost to the Client to ask FSCL to investigate or resolve the complaint.
- c) FSCL's contact details:
 - i. Freephone 0800 347 257;
 - ii. Email complaints@fscl.org.nz; and
 - iii. Website www.fscl.org.nz.

7 Record Keeping

a) The Client should provide all relevant documentation and any additional information requested by TMNZ to ensure all records are collected and the complaint is properly resolved on time. All records will be kept safe and will be processed in line with our privacy policy, which can be found on our website.

Complaint Form

Client Records

Full Legal Name:	
Address:	
Contact:	
Summary of the Co	omplaint
Please describe the way you think it sh	e service you wish to complain about (description, evidence, amount, and ould be resolved)
i .	

Possible docun	nentation that v	will be require	tation that may d: Client Statem ocumentation re	ent, cor	responden	nce with the	
Legal Name:							
Signature:							
			Date:				

For Internal use only:			
Complaint Received By:	Date:		
Acknowledgement sent to Client:	Yes	No	
Informed Client of initial Action:	Yes	No	
Final response provided to Client:	Yes	No	
Holding response provided to Client:	Yes	No	N/A
Signature of Officer:	Date:		