

# Congratulations on your hole in one!

**In order to claim your policy benefit of \$300.00 (inclusive of GST) you must provide the following:**

- Your scorecard signed by yourself and the marker
- The marker's name, address and daytime phone number
- A letter on the club's letterhead from the club's manager/secretary or other authorised official of the golf club confirming:
  - The length of the course
  - The length of the hole
  - That you were recorded as an entrant in an official 9 or 18 hole competition
  - The club's acknowledgement of your hole in one at the event.
- A copy of this completed form

Name of person claiming \_\_\_\_\_

Name of Golf Club \_\_\_\_\_

Date of hole in one \_\_\_\_\_

Claimant address \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact details

Phone number Private \_\_\_\_\_ Business \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

Name of marker \_\_\_\_\_

Marker's address \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact details

Phone number Private \_\_\_\_\_ Business \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

**Please specify how you would like to receive the funds:-**

We can deposit the funds of \$300.00 into **your bank account** as nominated below

Bank name \_\_\_\_\_

Account holder name \_\_\_\_\_

BSB number    -    Account number

We can deposit the funds of \$272.72 (net GST) into the golf club's bank account so they can distribute the funds to you for use at the golf club.

Bank name \_\_\_\_\_

Account holder name \_\_\_\_\_

BSB number    -    Account number

I acknowledge that the information above is true and correct

Name (Please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**X** / /

Should you require additional information or would like to discuss the process with the Zurich Property Claims Team, please phone 1800 611 372 or email [property.claims@zurich.com.au](mailto:property.claims@zurich.com.au)

# General Insurance Factsheet

Zurich is committed to customer service and is a member of the Insurance Council of Australia and a signatory to the General Insurance Code of Practice.

The Code applies differently to Retail Insurance<sup>1</sup> and Wholesale Insurance, as defined in the Code and the Code establishes a number of standards including those in relation to Retail Insurance set out below. The information below relating to financial hardship and the external dispute resolution arrangements set out in the Complaints Resolution Process section applies in connection with both Retail Insurance and Wholesale Insurance, as defined in the Code.

## Resolving your Claim

In the event of a claim, we will:

- accept or deny your claim and notify you within 10 business days if we do not require further information, assessment or investigation;
- notify you within 10 business days of receiving your claim of the further information we require to decide on your claim;
- if necessary, appoint an assessor, adjuster or investigator and advise you of their appointment within 5 business days;
- keep you informed at least every 20 business days of the progress of your claim. We will review your claim once we do not require further information, assessment or investigation unless we advise you otherwise. We will accept or deny your claim within 10 business days of those conditions being met;
- make a decision within 4 months of receiving your claim or 12 months under Exceptional Circumstances as set out in the Code;
- notify you if these timeframes are not practical for your claim and seek to agree on alternative timeframes with you.

If we are unable to meet these timeframes, agree alternative timeframes or agree on a hardship application or payment, you may make a complaint under our complaints resolution process, outlined below.

In the event of your claim being declined, we will provide you with written reasons for our decision and you can request a copy of the information that we have relied upon in assessing your claim, including reports from external third parties.

## Vulnerable Customers

We have policies and process in place, including training for our staff, to support customers experiencing vulnerability which may be due to a range of factors such as:

- age;
- disability;
- mental health conditions;
- physical health conditions;
- family violence;
- language barriers;
- literacy barriers;
- cultural background;
- Aboriginal or Torres Strait islander status;
- remote location; or
- financial distress.

Please tell us if you or someone acting on your behalf needs additional support or assistance so that we can work with you to identify how best to provide that support.

If you need support to meet identification requirements, then we will take reasonable measures to support you.

If you need an interpreter, we will provide you access to one where practicable.

Our insurance products comply with relevant State or Territory anti-discrimination requirements and we will treat people with any past or current mental health condition fairly.

## Financial Hardship

If you are an individual suffering Financial Hardship (except with regards to paying the premiums under an insurance policy) we will work with you to identify how best to support you and where we are seeking to recover money from you on the grounds that you caused damage or loss, the below Complaints Resolution Process section will also apply to you. We will :

- give you a form for you to apply for Financial Hardship support;
- give you contact details for the National Debt Helpline: 1800 007 007 if appropriate;
- keep you or your nominated representative informed of the progress of your application, where possible using your preferred method of communication;
- consider all reasonable evidence supporting your application;
- tell you if we need additional information to support your application, which you will need to provide within 21 days;
- put recovery action on hold if applicable while we assess your application;
- tell you in writing of our decision about whether to give you Financial Hardship support within 21 calendar days of receiving all requested information; and
- tell you in writing, about our Complaints process in case you are not satisfied with the outcome of your application;
- if you tell us that you intend to declare bankruptcy, then we will work with you to agree on the amount owed.

<sup>1</sup>Retail Insurance refers to certain motor vehicle, home building, home contents, sickness and accident, consumer credit, travel and personal and domestic property insurance provided to, or to be provided to an individual or for use in connection with a Small Business as set out in the Code.

When we first communicate with you about any money owed we will provide you with information:

- to show that the amount we are seeking to recover is fair and reasonable;
- about our Financial Hardship process; and
- about how to contact us in case you have any questions.

These Financial Hardship provisions also apply to any Collection Agent or solicitor collecting money for us.

### **Complaints Resolution Process**

If you have a complaint about your claim or the service you have received from us, please contact us directly on 132 687 or write to us at:

**Zurich Australian Insurance Limited**  
**PO Box 677 North Sydney, NSW 2059**

In a number of circumstances where you don't require a written response, we will resolve your complaint within 5 business days.

Where we are unable to resolve your complaint in that way, we will respond in writing to your complaint within 15 business days, if we have all the information required. If we cannot meet this timeframe because additional information or investigation is required, we will notify you within those 15 business days and seek to agree an alternative timeframe with you. We will keep you informed of the progress of your complaint at least every 10 business days unless otherwise agreed.

If you are not satisfied with our response or we cannot agree an alternative timeframe, you may have the matter reviewed through our internal complaint review process, which is free of charge. If you request your complaint to be reviewed and we have all the information required, we will respond, in writing within 15 business days. If we cannot meet this timeframe because additional information or investigation is required, we will notify you within those 15 business days and seek to agree an alternative timeframe with you. We will keep you informed of the progress of your complaint at least every 10 business days.

We subscribe to the independent external dispute resolution scheme administered by the Australian Financial Complaints Authority (AFCA), which is available to customers and third parties who fall within the AFCA Complaint Resolution Scheme Rules.

If our decision on your Complaint does not resolve your Complaint to your satisfaction, or if we do not resolve your Complaint within 45 calendar days of the date we first received your Complaint, you may refer your Complaint to AFCA.

If you wish to do so, you should refer your matter to AFCA as early as possible, as time limits can apply.

If AFCA advises you that AFCA cannot assist you, you can seek independent legal advice or access any other external dispute resolution options that may be available to you, for example by contacting the Department of Fair Trading, your Solicitor or Local Court as you may be able to have the matter resolved by:

- Small Claims Court or Tribunals
- Formal legal proceedings out of the District or Supreme Courts
- Mediation

### **Contact details for AFCA are:**

Online: [www.afca.org.au](http://www.afca.org.au)

Email: [info@afca.com.au](mailto:info@afca.com.au)

Mail: Australian Financial Complaints Authority  
GPO Box 3  
Melbourne VIC 3001

Phone: 1800 931 678

For full details of the Code, please read the Code which is available on [www.codeofpractice.com.au](http://www.codeofpractice.com.au)