



## **COMPLAINT HANDLING POLICY**

**ORBEX LIMITED** 





ORBEX LIMITED

Complaint Handling Policy

### **COMPLAINT HANDLING POLICY**

Orbex Limited (hereinafter the "Company") aims to provide superior services to all of its Clients.

The Company has appointed a Compliance Officer to efficiently handle any complaints from the Clients. This is to allow the Company to resolve and apply mandatory measures to avoid any recurring issues.

#### **Definition**

The Company classifies a complaint as any objection and/or dissatisfaction that the Client may have with regards to the provision of the services provided by the Company. A complaint form is enclosed at the end of this policy.

#### **Procedure**

The Compliance Officer shall be responsible for handling Client complaints, except in the case where the complaint involves the Compliance Officer, whereby the complaint shall be handled by the Representative Officer.

The Client may register a complaint by completing the complaint form, using any of the following options:

- Email: <u>Compliants.syc@Orbex.com</u>
- Postal Address: Orbex Limited

CT House, Office 9A Providence, Mahe

Seychelles

- 1. When the Compliance Officer receives the Client's complaint then a written acknowledgement will be sent to the Client within 7 business days;
- 2. The Company will attempt a final response within 30 business days, however in case we are still not in a position to resolve the issue then the Compliance Officer will notify you in writing stating the reasons for the delay and indicate an estimated time to resolve the issue;
- 3. A final response should be provided to the Client within 60 business days the latest from the date he submitted his complaint;
- 4. In the case where the complainant is still not satisfied with the Company's final response, then the complainant can refer his complaint with a copy of the Company's final response to the Financial Services Authority (FSA) in Seychelles for further examination.





ORBEX LIMITED Complaint Hand

# The contact details for the Financial Services Authority (FSA) in Seychelles are set out below:

PO Box 991

Address: Bois de Rose Avenue

Roche Caiman Victoria, Mahe, Republic of Seychelles

Phone: (+248) 438 08 00 Fax: (+248) 438 08 88

Email: <a href="mailto:complaints@fsaseychelles.sc">complaints@fsaseychelles.sc</a>

Website: <a href="http://fsaseychelles.sc/index.php/contact-us">http://fsaseychelles.sc/index.php/contact-us</a>

#### **Client Records**

The Client should provide all relevant documentations as well as any additional information requested by the Compliance Officer in order to ensure all records are collected and the complaint is properly resolved on time.

All records will be kept safe as per local requirements and for a period of seven (7) years.

[The complaint form can be found in the next page]





ORBEX LIMITED Complaint Har

## **Complaint Form**

Name	Account Number:
Address	Telephone Number:
Brief Summary of the Complaint:	
ease describe the product or service you are describe the product or service you are	e complaining about (description, evidence, amo
<ul> <li>Possible documentation to be provident</li> </ul>	ded (client statement, correspondence with porting documentation to be requested by
<ul> <li>Possible documentation to be provided</li> <li>Company as well as any other sup</li> </ul>	ded (client statement, correspondence with porting documentation to be requested by
<ul> <li>Possible documentation to be provided</li> <li>Company as well as any other sup</li> </ul>	ded (client statement, correspondence with porting documentation to be requested by
<ul> <li>Possible documentation to be provided</li> <li>Company as well as any other sup</li> </ul>	mentation that may help us to handle the comploided (client statement, correspondence with porting documentation to be requested by the Client's complaint)  ———————————————————————————————————

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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 Compliance Officer:	Date:	