



Feedback/Suggestion/Complaint Form

(Copy to be provided to the client)

1. CUSTOMER DETAILS

Surname : _____
Other Names : _____
Address : _____
A/c No : _____
Customer ID : _____
Email : _____
Phone No. : _____

2. FEEDBACK/SUGGESTION/COMPLAINT DETAILS

Product / Service Involved: _____
Transaction Date : _____
Transaction Time : _____

If you have previously referred the suggestion/problem to the Bank, please provide the following information:

Name of Staff : _____
Date Referred : _____

This section **MUST** be completed. Please attach additional pages for further documentation if necessary.

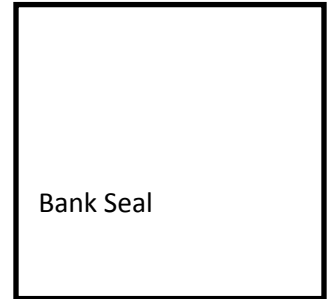
Details of feedback/suggestion/complaint:

Customer's Signature: _____

Date _____

3. Acknowledgement/ Escalation

SR Number : _____
Received By _____
Staff Name : _____
Job Title : _____
Phone : _____
Email : _____
Date : _____
Unit/Dept. : _____



Thank you for taking time to provide us with this information. In case, you are not satisfied with the response from above staff, please refer the matter to:

- | | | |
|---------------|---|--|
| Tier 1 | Branch Manager/Reporting Line
<i>(To be filled by bank staff)</i> | Name: _____
Contact No: _____
Email: _____ |
| Tier 2 | Senior Manager/Head of Department
<i>(To be filled by bank staff)</i> | Name: _____
Contact No: _____
Email: _____ |
| Tier 3 | Complaints Cell/Head of Service Excellence | Mr Bhagwan Ramma, Complaints Supervisor
T: 202 1703 E: contacts@sbmgroup.mu

Mrs Sultana Kanowah, Complaints Lead
T: 2021543 E: sultana.kanowah@sbmgroup.mu

Mrs Linita Kim Currun, Head of Service Excellence
T: 2021421 E: Linita.KimCurrun@sbmgroup.mu |
| Tier 4 | The Chief Executive | T: 2021615 E: CE.Secretary@sbmgroup.mu |
| Tier 5 | The Office of Ombudsperson for Financial Services | T: 4686475 E: ombudspersonfs@myt.mu |