COMPLAINTS REGISTRATION AND RESOLUTION POLICY

FlexiFocus

Underwritten by Admin Focus Underwriting Managers (Pty) Ltd (FSP 50086) on behalf of Bryte Insurance Company Limited

1. Purpose and application

This policy sets out how FlexiFocus, Admin Focus Underwriting Managers (Pty) Ltd (“AFUM”), your broker, and Bryte Insurance Company Limited (“Bryte”) register, investigate, and resolve complaints raised by clients. It applies to every policy administered on the FlexiFocus platform and is issued in line with the Financial Advisory and Intermediary Services Act 37 of 2002 (“FAIS Act”), the Policyholder Protection Rules (“PPR”), and Treating Customers Fairly (“TCF”) Outcome 6, which requires that clients do not face unreasonable barriers to lodge a complaint, and receive a fair and timely response.

2. Key definitions

Complaint **—** an expression of dissatisfaction by a client relating to a financial product or service provided by AFUM, a broker, or Bryte, where a resolution or remedial action is explicitly or implicitly expected. This includes an allegation that the client has suffered, or may suffer, financial loss, damage, or unfair treatment.

Enquiry **—** a routine request for information (for example, a query on a premium or a status update) that does not allege prejudice or unfair treatment. Enquiries are handled through ordinary service channels and are not logged as complaints.

FAIS complaint **—** a complaint alleging that AFUM, Bryte, or a broker has contravened the FAIS Act, has negligently or wilfully rendered a financial service causing or likely to cause prejudice, or has treated the client unfairly. A FAIS complaint must be recorded and dealt with in writing.

Reportable complaint **—** any complaint other than one resolved to the client's satisfaction within the ordinary process for handling client queries, or one upheld immediately by the first person who received it.

Upheld **—** the complaint has been finalised wholly or partly in the client's favour, the client has accepted the outcome (or acceptance can reasonably be assumed), and every undertaking made has been met.

Rejected **—** the complaint has not been upheld and the matter is regarded as finalised after the client has been informed in writing that no further action is intended.

Goodwill payment **—** a payment, benefit, or service provided to resolve a complaint where neither AFUM nor Bryte accepts liability for financial loss.

3. Our commitment to fair treatment

FlexiFocus clients will never face an unreasonable barrier to lodging a complaint. There is no cost to submit or pursue a complaint through any stage of this process. Every complaint is acknowledged, investigated on its merits, and resolved as quickly as the facts allow. Where a complaint cannot be resolved within the timeframes below, the client is proactively informed of the delay and the revised expected timeline — this obligation continues throughout the process, in line with Policyholder Protection Rule 17.

4. How to submit a complaint

A complaint about your policy, a claim, or the service you have received can only be registered by logging into your FlexiFocus client account:

1. Log in to your FlexiFocus client portal.
2. Select “Register a complaint” from your account menu.
3. Provide your policy number, a clear description of the issue, the outcome you are seeking, and any supporting documents.
4. Submit — your complaint is immediately routed to your broker for acknowledgement.

You can track the status of your complaint at any time from the same portal area, including which stage it has reached and who is currently responsible for it.

5. The complaints workflow

Once submitted, a complaint moves through the following stages. Timeframes are measured in South African business days.

1
Submission
Immediate

CLIENT

Complaint registered via the FlexiFocus client portal.

2
Acknowledgement
2 business days

BROKER

Broker acknowledges receipt and confirms understanding of the complaint.

3
Referral to UMA
1 business day

BROKER → AFUM

Broker submits the complaint and supporting information to AFUM.

4
Investigation
Within 15 business days of registration

AFUM

AFUM investigates as UMA; may request further information from the client or broker.

5a
Resolution
Within 15 business days

AFUM

Where AFUM can resolve the matter within its mandate, the outcome is communicated in writing.

5b
Escalation to Bryte
Within 5 business days of that determination

AFUM → BRYTE

Where AFUM cannot resolve the matter (e.g. disputed liability, indemnity, or policy interpretation), the complaint is escalated to Bryte with AFUM's full investigation file.

6
Insurer decision
Within 15 business days of escalation

BRYTE

Bryte reviews and issues a final internal decision, communicated to the client via AFUM and the broker.

7
External escalation
No prescribed limit – NFO requires internal process exhausted first

CLIENT

If still unresolved, or if the client is dissatisfied with the outcome, the client may refer the matter externally (see Section 6).

6. External escalation

If a complaint is not resolved to the client's satisfaction after the internal process above, or if AFUM and Bryte have not reached a final decision within the timeframes set out in Section 5, the client may escalate the matter externally. The right body to approach depends on the nature of the complaint:

NATURE OF COMPLAINT	CORRECT EXTERNAL BODY	CONTACT DETAILS
Claim rejection, settlement amount, delay, or general service	National Financial Ombud Scheme (NFO) – Non-Life Insurance Division	www.nfosa.co.za | 0860 800 900 | info@nfosa.co.za

NATURE OF COMPLAINT	CORRECT EXTERNAL BODY	CONTACT DETAILS
Financial advice, product suitability, disclosure, or broker/ intermediary conduct	Ombud for Financial Services Providers (FAIS Ombud)	012 762 5000 | info@faisombud.co.za
Concern about how AFUM or the NFO handled the complaint process itself	Financial Sector Conduct Authority (FSCA)	www.fsca.co.za

NOTE

The National Financial Ombud Scheme (NFO) absorbed the former Ombudsman for Short-Term Insurance in March 2024 and now handles non-life insurance disputes through its Non-Life Insurance Division. The FAIS Ombud remains a separate statutory scheme for complaints about advice or intermediary conduct — it has not yet been absorbed into the NFO. Where a complaint involves both a claim dispute and an advice or conduct concern, it may need to be lodged with both bodies.

7. Record-keeping and reporting

1. Every complaint, whether resolved immediately or escalated, is logged with a unique reference number, the date received, the nature of the complaint, and its outcome.
2. Records are retained for a minimum of 5 years from the date of resolution, in line with FAIS Act record-keeping requirements.
3. AFUM compiles a complaints register for internal governance review and for reporting to Bryte and the FSCA as required.
4. Systemic issues identified through complaints trends are escalated to AFUM management for corrective action.

8. Contact details

Admin Focus Underwriting Managers (Pty) Ltd — FSP 50086

Anglers Loft No 48, Peninsula on Vaal, Oranjeville, 1995 | info@adminfocus.co.za | adminfocus.co.za

Bryte Insurance Company Limited — licensed non-life insurer, regulated by the Prudential Authority

Refer to your policy schedule for Bryte's direct contact details.

This policy forms part of your FlexiFocus policy documentation and is available at any time from your client portal.