

FINANCIAL ADVISORY AND INTERMEDIARY SERVICES ACT, NO. 37 OF 2002

COMPLAINTS REGISTER

FSP NAME:

(“FSP”)

FSP NO:

COMPLAINT DETAILS

Compliant ref. no.:

Date received	Responsible person	Client name	Policy no. / other ref.	Resolved / Dismissed (Y)	Date of notification to client
Details of complaint					
Outcome					
Details of FAIS non-compliance					
Details of follow-up action					
Managerial control		Signature		Date	