

## Thank you for bringing this to our attention.

We take every complaint seriously and are committed to resolving matters fairly, transparently and promptly. Please complete each section below — attach any supporting documents you would like us to review — and return the form to [jvermaak@dynamicconsult.co.za](mailto:jvermaak@dynamicconsult.co.za) or hand-deliver it to our office.

### 1 CLIENT DETAILS

Full name

ID / Passport number

Contact number

Email address

Physical / postal address

### 2 COMPLAINT DETAILS

Date of incident

Product / service involved

Advisor or representative involved (if applicable)

Description of complaint — include dates, names and the specific concerns you would like us to address.

Have you previously raised this issue with us?

Yes

No

If yes, please provide details (date contacted, person, response received).

**3 DESIRED OUTCOME**

What would you consider a fair and reasonable resolution to your complaint?

**4 CLIENT DECLARATION**

I confirm that the information provided in this complaint form is true, accurate and complete to the best of my knowledge.

Client signature  Date

**FOR OFFICE USE ONLY** *Completed by Dynamic Consult — do not write below this line as the client.*

Complaint reference number  Date received

Received by  Assigned to

Resolution date  Method of client notification  
Email      Phone      In-person      Letter

Resolution summary

Final decision      Resolved      Further investigation      Escalated      Client notified:      Yes      No

Signature — compliance officer / manager  Date