

TRISURA GUARANTEE INSURANCE COMPANY

COMPLAINT HANDLING PROCEDURE

2025

The purpose of this document is to outline the procedures to be followed by staff of Trisura Guarantee Insurance Company (“Trisura”), and Michèle Desjardins, in her capacity as the company’s Complaint Liaison Officer (“CLO”), with respect to the handling of complaints from consumers of the company’s products and services.

1. COMPLAINTS RECEIVED BY FIELD STAFF/BRANCH OPERATIONS

a) Verbal complaints

In the event a consumer voices a complaint to a frontline staff member, *and the complaint is not of a nature that it can be, and is, readily resolved to the satisfaction of the consumer*, the staff member must advise the consumer that Trisura takes such matters seriously and, in order to be in a position to investigate the matter thoroughly, must request that the complaint be made in writing to the attention of, as applicable, the regional vice-president or the senior product line manager for the respective province. The staff member must document the complaint in detail and advise his or her direct supervisor and the regional vice-president or product line manager of the matter.

b) Written complaints

Once the complaint is received in writing (or in the event the initial consumer contact is in writing), *and the complaint is not one of the six types noted in 2(a), below*, the regional vice-president or product line manager must, with the appropriate staff members, determine a course of action to resolve the complaint and keep a proper record of the complaint that includes all correspondence pertaining to the matter. The relevant manager must also immediately send an email to the CLO identifying the consumer, the nature of the complaint, the dates of the original and written communications, and the proposed action plan. The CLO must confirm receipt of this email and copy other relevant personnel.

c) Disposition of complaints

In the event the complaint is one that can be handled by the “front line”, and if any necessary investigation can be concluded promptly, the manager must write to the consumer setting out the company’s position on the matter within ten (10) business days of receipt of the written complaint. *This written position must be approved by the CLO, or a person designated by the CLO, before it is sent, and must be sent by email or registered mail.*

Should the complaint require a more lengthy investigation, or if additional information is required from the consumer, the manager must send an acknowledgement to the consumer within five (5) business days of receipt of the written complaint. This acknowledgment should summarize the nature of the complaint and, if no additional information is required, advise the consumer that the manager will be conducting an investigation and will respond with the company’s position on the matter within thirty (30) business days.

In the event that additional information is required, this should be clearly set out in the acknowledgement along with a statement that the manager will respond within thirty (30) business days of receiving the information.

If the complaint pertains to a consumer provision under the *Insurance Companies Act* (Canada), the acknowledgement letter should also direct the consumer on how to contact the Financial Consumer Agency of Canada, as follows:

Financial Consumer Agency of Canada
427 Laurier Avenue West, 5th Floor
Ottawa, Ontario K1R 7Y2
Phone: Toll-free, English (866) 461-3222; Toll-free French (866) 461-2232
Email: compliance@fcac.gc.ca
Web site: www.fcac.gc.ca

In all cases, the acknowledgement and the manager's subsequent response must be approved by the CLO, or a person designated by the CLO, before being sent, and must be sent by email or registered mail.

d) Subsequent steps

If the consumer does not respond within one (1) year of the written position, the complaint may be considered closed. If the consumer accepts the company's position in writing, the manager should send a copy of the acceptance to the CLO and the complaint may also be considered closed. In the event the consumer refuses in writing to accept the company's position, the complaint must be escalated to the CLO.

2. ESCALATION OF COMPLAINTS TO THE CLO

a) Written complaints

If any of the following are received *in writing*, they must be referred immediately to the CLO:

- i) Any complaint received from a consumer in Quebec;
- ii) An expression of dissatisfaction with the company's business practices, or an allegation of unfair treatment by the company;
- iii) A complaint made directly to, and referred to the company by, a regulator;
- iv) An allegation of breach of fiduciary duty or acting in bad faith;
- v) A statement of claim outside of the ordinary course of business; or,
- vi) A refusal to accept the company's position letter as described under 1(d), above.

b) Complaints made directly to the CLO or head office staff

In the event a verbal or written complaint is made directly to the CLO or a head office staff member, the CLO will review the matter and decide whether it should be referred to the appropriate branch or product line manager for investigation and resolution.¹

¹ Refer to 4 b) at page 4, below, if the complaint pertains to a consumer provision under the *Insurance Companies Act* (Canada).

c) Disposition by the CLO

General

In the six situations listed under a), above, the CLO must commence the investigation immediately and send a written acknowledgment to the consumer within five (5) business days stating that they are handling the matter and will be responding within thirty (30) business days. A copy of this Complaint Handling Procedure should be attached or linked to the written acknowledgment.

In the event the CLO requires additional information, those requirements should be specified in the written acknowledgement, which would also state that a response will follow within thirty (30) business days of receiving the additional information.

If the consumer complained directly to a regulator, the CLO must keep the regulator informed as the investigation proceeds.

Quebec-based complaints

In the case of complaints received from consumers in Quebec, the CLO must also state in the written acknowledgement that the consumer has a right to obtain assistance in filing their complaint and that if the consumer is dissatisfied with the complaint examination procedure or with the answer following the examination, the consumer may ask that a copy of the complaint file be transferred to the Autorité des marchés financiers (“AMF”) for examination and possible mediation. The CLO should provide the AMF’s contact details, which are as follows:

Autorité des marchés financiers
Service du traitement des plaintes
800, square Victoria, suite 2200
Montréal, Québec H3C 0B4
Phone: Montréal (514) 395-0337; Québec City (418) 525-0337; Toll-free (877) 525-0337
Fax (toll-free): (877) 285-4378

Quebec consumers may validly file their complaint using the complaint form available on the website of the AMF: <https://lautorite.qc.ca/en/general-public/assistance-and-complaints/making-a-complaint>

The CLO shall provide the consumer in Quebec with a final response to their complaint as soon as possible, but no later than sixty (60) days following the receipt of the complaint. However, where warranted by exceptional circumstances or circumstances beyond its control such as delays in obtaining information from third parties, a lack of cooperation or complex complaints requiring an in-depth investigation, the CLO shall provide the final response in writing as soon as possible, but no later than on the ninetieth (90th) day following receipt of the complaint.

3. WRITTEN FINAL POSITION

Once the CLO has completed the investigation and has made a final determination with respect to the company’s position on the matter, the CLO must set out the company’s final position in writing to the consumer.

a) Quebec requirements

In addition to those noted above under 2a) and c), the CLO must transfer the consumer's file to the AMF if so requested by the consumer because of dissatisfaction with the examination of the complaint or the answer obtained.

b) Other than Quebec requirements

The written final position must state that if the consumer is not satisfied with the company's final position, the consumer may contact the General Insurance OmbudService ("GIO"), an independent industry organization established to handle unresolved complaints. If the consumer chooses to contact the GIO to resolve the complaint, the GIO will arrange a two-hour mediation session between the consumer and the insurance company, following which a report with non-binding recommendations will be issued if the complaint remains unresolved.

The GIO's contact details are as follows:

General Insurance OmbudService
4711 Yonge Street, 10th floor
Toronto, Ontario M2N 6K8
Phone: Toll free: (877) 225-0446
Fax: (416) 299-4261
Email: info@gio-scad.org
Website: English www.giocanada.org; French www.scadcanada.org

4. REPORTING REQUIREMENTS

a) AMF Complaint Report

All complaints that are escalated to the CLO for resolution, as well as complaints that allege product design issues, unfair sales practices, ethical misconduct, illegal activities and/or breach of confidentiality of customer information, must be reported to the AMF. Reporting is done on an annual basis no later than May 1 for the period covering the prior calendar year (i.e. January 1 to December 31).

b) Federal complaints

In the unlikely event a complaint pertains to a consumer provision under the *Insurance Companies Act* (Canada), the complaint must be reported to the Financial Consumer Agency of Canada within sixty (60) days of the complaint being elevated to the CLO for handling or received by the CLO (or a board member) directly.

5. STAFF COMPLIANCE

All staff members are expected to comply with the procedures outlined in this document. Please contact Michèle Desjardins, CLO, in the event you have any questions.