

Complaint Form

Alternative Financing & recognised financial advisory services to SMEs

Business customers can use this form to send a complaint to the Dutch Institute for Financial Disputes (Kifid) relating to alternative financing or recognised financial advisory services. The complaint should relate to a business finance product or service as defined in the ‘Gedragscode MKB Financiers’ or to financial advisory services as defined in the ‘Gedragscode Erkend Financieringsadvies MKB’. The complaint should relate to a financial services provider that has endorsed the relevant ‘Gedragscode’.



1. My details

Mrs. Mr.

Company Name	<input type="text"/>	
First name(s) and family name	<input type="text"/>	<input type="text"/>
Street and house number	<input type="text"/>	<input type="text"/>
Postcode and place	<input type="text"/>	<input type="text"/>
Country (if not in the Netherlands)	<input type="text"/>	
Daytime telephone number	<input type="text"/>	
E-mail	<input type="text"/>	
Turnover	€	<input type="text"/>
The total principal sum of financing with the financial services provider	€	<input type="text"/>

2. Representative

...if someone is acting on behalf of your company

Mrs. Mr.

First name(s) and family name	<input type="text"/>	<input type="text"/>
(Name of the representative's company)	<input type="text"/>	
Street and house number	<input type="text"/>	<input type="text"/>
Postcode and place	<input type="text"/>	<input type="text"/>
Country (if not in the Netherlands)	<input type="text"/>	
Telephone number	<input type="text"/>	
E-mail	<input type="text"/>	
Nature of the relationship	<input type="checkbox"/> professional <input type="checkbox"/> other, namely	<input type="text"/>

If a representative is acting on your behalf:

- the responsibility for them taking timely action or for any delays caused by the representative lies with you;
- generally this person will handle all correspondence;
- your representative should also sign the complaint form.

3. I am making my complaint against

Name financial services provider

Street and house number

Postcode and place

Telephone number

Did you already submit this complaint to the financial services provider?

yes, on - -

no

Have you received a reply to your complaint?

yes, on - -

no

Did you already submit this complaint to a court or any other dispute resolution body?

yes

no

If your complaint is about two financial service providers :

Name of the second financial services provider

Street and house number

Postcode and place

Telephone number

Did you already submit this complaint to the second financial services provider?

yes, on - -

no

Have you received a reply to your complaint?

yes, on - -

no

Did you already submit this complaint to a court or any other dispute resolution body?

yes

no

4. Description of the complaint

Please describe as briefly as possible why you disagree with the financial services provider's definitive standpoint on your complaint.
Do you need more space? Please type the text in a separate document and send as an attachment.



5. Financial loss

Have you suffered financial loss? yes no

If so, what is the amount? €

Please provide supporting evidence.

Are you also claiming legal interest? yes no

If so, from which date? - -

And over what amount? €



6. Possible solutions

What is your proposal to resolve this complaint?

7. Privacy

I am aware of the Kifid Privacy statement (which can be found on www.kifid.nl).

I understand that the information I provide to Kifid may be shared with:

- the financial services provider(s) against whom I am making the complaint;
- external advisors to Kifid.

Kifid will not retain your complaint file for any longer than necessary once the complaint procedure has been completed, subject to the statutory retention periods.

I am willing to take part in a customer satisfaction survey that Kifid commissions from a third-party.

8. Declaration

I have answered all the questions correctly and to the best of my knowledge.

I understand that the 'Reglement voor de behandeling van klachten door de Geschillencommissie Kifid vanaf 1 april 2022' available in Dutch only at www.kifid.nl, applies to this complaint procedure.

My complaint meets the following regulatory requirements:

- I am a natural or legal entity.
- I am acting for myself as a professional or on behalf my company.
- My company's annual turnover or balance sheet total does not exceed €5,000,000.

By signing this form I request that Kifid handle my complaint and I agree to pay Kifid the statutory fee of €250 for dealing with my complaint.

I am aware that any decision made by the Disputes Committee about my complaint will be binding, unless an exception applies as stated in question 16 of the 'Reglement voor de behandeling van klachten door de Geschillencommissie Kifid vanaf 1 april 2022'.

In which case, the ruling will not be binding.

Date - -

Date - -

Business owner's signature

Representative's signature

9. Supporting documents

...to be sent with the complaint form

In order to handle your complaint Kifid needs a copy of the following documents.

Do not send us **any** original documents.

Kifid cannot return any of the documents you send.

- all correspondence about your complaint
- contract(s) relating to the finance or financial advice
- conditions of finance or the terms of the financial advice
- most recent approved annual figures
- extract from the Chamber of Commerce
- any other relevant documents

Only send the complaint form and supporting documents as follows:

1. single copy
2. A4 format
3. copied on one-side only
4. without staples, paper clips, sellotape, glue, perforations and not bound or in book form

10. Send complaint

Please send the completed complaint form and the supporting documentation to:

Kifid

Small business Financing Service desk
Postbus 93257
2509 AC Den Haag
The Netherlands

On receipt of your complaint form, Kifid will send you the information you need to pay the €250 statutory contribution.

