Barclays PPI Complaint Form

For Bank Use Only
Our Reference Number
Your Account Number
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If we've written to you about this PPI complaint already, please give us the Reference Number from the most recent letter we sent to you.
Please provide as much detail as possible.
A. Your details
1. You
Title First name Middle name(s) Last name Date of birth Description Descripti
Address*
Postcode/Zip Code/ Country Code
* If you've moved address since the time the policy was taken out, and you have an open account with us, please ensure you update your address on our systems. Otherwise, we may need to verify your identity using information from a credit reference agency, which may involve credit reference agencies checking the details supplied against any particulars on any database (public or otherwise) to which they have access. They may also use your details in the future to assist other companies for verification purposes. This will allow us to complete our investigation and write to you with the outcome. This search is only visible to you, and will have no affect on your credit rating or ability to obtain future credit. This search is automatically removed after 12 months.
Contact Information
We may need to get in touch with you by phone, text, email, or by post. Please provide your contact details below.
This information is for this form only. If you bank with us and need to update your details, you can do so in Online Banking
or in branch.
Main number Alternate number
Email address ¹
Your PPI complaint outcome Your PPI complaint outcome will be sent to you via letter to the address indicated above.
Please provide written responses in: Audio CD Braille Large Print
Alternative format communications will take a little longer to arrive. Please allow up to two weeks.
Personal Circumstances
If you have any personal circumstances we should take into account, please let us know here.

By providing your email address, you confirm and accept that any emails sent by us to you won't be sent in a secured or encrypted format. The Barclays Group accepts no liability for any damage, loss or disclosure caused by any virus transmitted by this email. E-mail transmission cannot be guaranteed to be secure or error-free as information could be intercepted, corrupted, lost, destroyed, arrive late or incomplete, or contain viruses. Please be aware that if you are sharing a mail account or using a company mailbox, your email could be read by a third party.



¹ Thank you for supplying your email address. By doing so, you confirm that we can email you about your complaint. Complaint responses may contain information such as transaction details as well as any general details about the complaint investigation.

Your details (continued)

Previous details

Have you ever had a different last name? For example if you changed it	name when you got married or by Deed Poll.
Title Last name	
Title Last name	
Title Last name	
If you lived at a different address when you held your product or PPI po	olicy with us, then please let us know.
Previous address 1	
	Postcode/Zip Code/ Country Code
Previous address 2	,
	Postcode/Zip Code/ Country Code
Previous address 3	
	Postcode/Zip Code/ Country Code
Previous address 4	
	Postcode/Zip Code/ Country Code
Previous address 5	
	Postcode/Zip Code/ Country Code

2. Were you living in the UK when you took out your PF	야?
Yes No No	
3. Joint complainant	
Yes No If you selected No, go to next section	
By completing this section, you are confirming you wish to raise product or policy holder. If you only wish to raise a complaint finames, leave this section blank.	
Title First name Middle name(s) Last name	Date of birth DD/MM/YYYYY
Address*	
	Postcode
	om a credit reference agency, which may involve credit reference agencies or otherwise) to which they have access. They may also use your details in the o complete our investigation and write to you with the outcome. This search is
Joint complainant's Contact Information	
Main number	Alternate number
Email address ¹	
Your PPI complaint outcome	
Your PPI complaint outcome will be sent to you via letter to the	e address indicated above.
Please tick here if you need written responses in	
Audio CD Braille Large Print	
If you feel you need additional support or our process needs a	dapting to suit any particular needs you may have,
please tell us here.	

¹ Thank you for supplying your email address. By doing so, you confirm that we can email you about your complaint. Complaint responses may contain information such as transaction details as well as any general details about the complaint investigation.

By providing your email address, you confirm and accept that any emails sent by us to you won't be sent in a secured or encrypted format. The Barclays Group accepts no liability for any damage, loss or disclosure caused by any virus transmitted by this email. E-mail transmission cannot be guaranteed to be secure or error-free as information could be intercepted, corrupted, lost, destroyed, arrive late or incomplete, or contain viruses. Please be aware that if you are sharing a mail account or using a company mailbox, your email could be read by a third party.

B. About the Policy

4. What type of produc	it did your PPI cover?			
Personal loan	Business loa	n N	Nortgage	Overdraft
Credit Card	Loan secured on your hom	е	Not sure	
	s was your product from?			
Barclays	Barclaycar		Voolwich	Littlewoods
Goldfish	Morgan Stanle	ey	Egg	I dont't know
Other				
6. Please provide the fo	ollowing details:			
Account number			Sort code	
Credit card number	XX-XXXX		Please only give the e.g. 1234-56XX-X	ne first 6 and last 4 digits XXXX-1234
Policy Number		Policy start da	te	
7. How did you take ou	it the policy?			
Face to face in a branch	Face to face no	ot in a branch	Over the p	phone
Through the post	Usin	g the internet	Any	other
you can add the details If your circumstances were	policy where your personals of that policy too: The different for the other policy,			
other policy				
C. About your emp	loyment and personal	situation		
9. When you took out t	the PPI policy, what was yo	ur employment stat	us (please choose	from the below)
Full time employed		Part time employed	16 hours or more	
Part time employed l	less than 16 hours	Temporary/Agency	worker	
Not working/Unpaid	work	Retired		
Director of a compar	ny	Self employed		
Fixed term contract		Student full time ec	lucation	
Student part time ec	ducation – also employed 16 ho	ours or more		
Student part time ec	ducation – also employed less t	than 16 hours		
Student part time ec	ducation – not employed			
Any other, provide details				

C. About your employment and personal situation (continued)10 When you took out the policy, how long had you been in continuous employment?

Years Months							
11. If you were employed w	hen you too	k out the إ	policy, pleas	e provide	e details	of your j	ob or jobs
Employer name							
Your job role			Fro	n			То
Employer name							
Your job role			Fro	n			То
Employer name							
Your job role			Fro	n			То
Employer name							
Your job role			Fro	n			То
(If there are more employment	details that y	ou want to	add, please p	ovide in s	section 1	9)	
12. When you took out the		was your	_	ay?	7		
Amount	Per week		month		year		
Please tick the appropriate cho	ice.						
Please tick the appropriate cho		would you	have repaid	your mo	onthly bo	orrowing	if your salary stopped
	policy, how v					_	
13. When you took out the	policy, how vas much deta					_	
13. When you took out the Please ensure you include a	policy, how vas much deta					_	
 13. When you took out the Please ensure you include a Provide details and amounts of Savings Sick pay from your employer 	policy, how was much detains any: including how	ail as poss	ible in order	for us to	assess	your con	nplaint fully.
 13. When you took out the Please ensure you include at Provide details and amounts of Savings Sick pay from your employer Redundancy pay and how mental and an amounts of the plants of the pl	policy, how was much detains any: including how	ail as poss	ible in order	for us to	assess	your con	nplaint fully.
 13. When you took out the Please ensure you include a Provide details and amounts of Savings Sick pay from your employer 	policy, how was much detains any: including how	ail as poss	ible in order	for us to	assess	your con	nplaint fully.
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C. About your employment and personal situation (continued) 14. Did you have any known medical conditions at the time you took out the policy? If you selected Yes, please tell us about your condition. The name of your condition. Your recollection of what the sales material or sales adviser said about your medical condition and your ability to claim under the policy You may wish to include your understanding of any policy exclusions that were mentioned during the sale or in the sales material provided. D. More information 15. Have you ever made a claim on the policy for periods of sickness or unemployment? Please provide details of your claim. What was the claim for? Was it successful?

D. More information (continued)

16. Do you currently have or have you ever had an insolvency agreement in place?

Please provide details

- when did the agreement start and has it ended?
- the name and address of your insolvency practitioner or official receiver
- the reference number of the agreement
- the type of insolvency (IVA, bankruptcy)

Please note: if you're in an IVA/Bankruptcy then any refund you may be entitled to may be paid direct to your In	solvency
Practitioner/Official Receiver	
17. Tell us more about the money you borrowed when you took out the policy?why did you borrow the money e.g. to pay bills, to pay for a holiday, to pay off existing debt?if you paid off existing debt, how much did you pay off with the borrowing?	

D. More information (continued)

• what information were you given before and after you took out the policy?

18. Please tell us why you are complaining, why you are unhappy with your policy and what you recall about how it was sold to you. The information you provide here will help us fully investigate your complaint.

• how were the policy terms and costs explained to you? • why did you decided to take out the policy? 19. Please use this section to tell us if there are more details that you want to add.

E. Declaration

In the event of a refund do you have a specific Barclays account	nt you would like us to credit?
If you're eligible for a refund and currently hold an active Barch Alternatively, we can send you a cheque.	ays account, we will credit the account details you provide.
Account No.	Sort code
Finally please read below and sign this declaration. Thank you for completing this form. To enable us to investigate the boxes and sign to agree to the following:	te your complaint, we require you to sign below. Please tick
Where I have provided Joint complainant details, I confirm PPI policies described and they have provided my conservations.	n that they want to make a complaint about the sale of all nt to complete this form on their behalf.
I confirm that I want to make a complaint about the sale	of all PPI policies described.
I confirm that all the information I've given in this form is to it being used in the investigation and resolution of my of	rue and accurate to the best of my knowledge – and I consent complaint relating to PPI policies described in this form.
If my details have changed, I consent to an identity chec 'Your address' section.	k using a credit reference agency – as detailed in the
progress of my complaint. I have read, understood and a	allow Barclays to contact me and keep me updated on the ccept the risk associated with the use of email, as outlined. confirm they're aware of the security risk involved and agree
for Retail Customers and, to the extent I have provided in consent – or are otherwise entitled to provide the inform	ation to Barclays, to be used in the manner described.
Your signature	Joint complainant signature
Date D D / M M / Y Y Y	Date D D / M M / Y Y Y

Please return this completed form directly to us either using the pre-paid envelope if supplied or to the address below:

FREEPOST BARCLAYS PPI COMPLAINTS

Privacy policy

The form asks you for personal and financial details relevant to your relationship with Barclays, Barclaycard, Firstplus, First Data, Littlewoods, Woolwich, Morgan Stanley, Goldfish, Egg (each and together 'us', 'we' or 'Barclays'). The Barclays Group uses and retains details you give about yourself and others to resolve your query or complaint and for research and statistical analysis to improve our services. We may pass your information collected to people who provide a service to us or are acting as our agents, on the understanding that they will keep the information confidential.

Complaint Form Guidance Notes

Why should I complete the PPI Form?

The form is designed to make it as easy as possible for you to submit your complaint about why you feel your PPI was mis-sold. It'll help assist us with assessing your complaint thoroughly by helping you provide relevant information about the sale of your policy and your circumstances. It may be helpful if you have any relevant documentation available with you when completing the form, for example policy documents, credit card statements or credit agreements.

Do I need to complete the PPI Form?

You don't need to complete a form to have your complaint investigated. However, completing it may allow us to reach a decision more quickly because it asks for comprehensive detail that may not have been covered in a letter.

If you're complaining about more than one PPI policy or product and your personal circumstances were the same at the time each policy/product was sold you only need to complete one form. If your personal circumstances were different you will need to complete a separate one for each.

How long should I expect to wait before I hear about my complaint?

We'll post you an acknowledgement for your complaint and give you a personal reference number within 5 working days. Once your have your reference number, it'll be easier to get an update on the progress our investigation. Please allow two weeks for your letter to arrive in the post. We'll write to you within 8 weeks with our decision. We may need to contact you during this time for further information. Please note there may be exceptions to this timeline depending upon the information that is available to us and the nature of each individual complaint.

How to complete the Form

Your details Section A: Q1 to Q3	Completing this section will help us to locate your account and PPI policy. Please also use this section to tell us your preferred contact information. We'll use these to get in touch with you if we need to discuss anything further and to keep you updated.
About your Policy Section B: Q4 to Q8	This is where you tell us about the policy and the processes that you went through while taking out your policy. Please try to provide as much detail as possible.
About your employment and personal situation Section C: Q9 to Q14	This is where you give us the details about your employment during the time you held your PPI policy. You can also give us the details about any medical conditions you had at the time you took out your policy and if you were covered by any health benefits by your employer or any other policy.
More information Section D: Q15 to Q19	This is where you can provide us more details about the policy that can help us make a decision on your complaint. This also gives you the opportunity to give us the reason that you were unhappy with the policy or the way it was sold to you.
Declaration Section E:	Please read this section carefully, sign and date it. In this section you are confirming you've provided your bank details (if you choose to do so) and that you've included everything you want to tell us about the complaint. It is important that the form is signed and dated. When signing the form you are confirming you'd like us to investigate your complaint. You're also authorising us to perform any required name and address checks as part of the investigation into your complaint, and where applicable authorising your appointed third party/parties to represent you in this complaint.

Complaint Form Guidance Notes (continued)

What to do when the Form is completed

Please return the completed form to FREEPOST BARCLAYS PPI COMPLAINTS

Before posting, you may wish to take a copy of your completed form for your own records.

Claims Management Companies (CMC)

You can make your complaint directly to us and don't need to use a claims management company (CMC). A CMC will typically charge an up-front fee or take a proportion of any final payment you may be due. We'll assess all complaints sent directly to us in exactly the same way that we treat complaints sent in by a CMC. Your complaint will not be dealt with differently or quicker by using a CMC.

If you've nominated a CMC or any third party to act on your behalf, you'll need to settle any fees or charges with them directly. Please ensure you refer to the terms of your agreement with them.

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