

# MBNA customer questionnaire: Payment Protection Insurance

Please complete all sections of the questionnaire as fully as possible, so that your complaint can be assessed quickly. We aim to provide a response to your complaint within 8 weeks.

The questionnaire asks for:

- Some of your personal and financial details at the time of the Payment Protection Insurance (PPI) sale.
- Your recollections about what happened during the PPI sale.
- Your current contact details as we may need to get in touch – usually by email, phone or in writing.

If we call, we usually call from a withheld number...we'll leave a message if we miss you, or if you'd rather not answer. We may send you a text message asking you to call us

**The complaints process is easy to understand and free. We treat all complaints we receive in the same way. If you use a Claims Management Company (CMC) we won't treat the complaint any differently but be aware they may take a share of any money you're entitled to.**

You may wish to take a copy of the completed questionnaire, to help you if you later decide to refer your complaint formally to the Financial Ombudsman Service.

**Please tick to indicate the product(s) you are complaining about:**

Credit Card  Loan  Loans.co.uk  Business Lending

## Section A: about you

our reference:

### A.1 your name and contact details

#### *your details*

surname  title

first name(s)

date of birth   
| d d | m m | y y y y |

#### *previous name we may have known you as*

title

address for writing to you, including your postcode

daytime phone

mobile

home phone

email

previous address your account was registered to, including its postcode (if applicable)

**A.2 if someone is complaining on your behalf please give us their details**

their name	<input type="text"/>	relationship to you	<input type="text"/>
address for writing to them, including postcode	<input type="text"/>		
their daytime phone	<input type="text"/>	their fax	<input type="text"/>
their email	<input type="text"/>	their ref	<input type="text"/>

**A.3 what is the account number(s) you are complaining about?**

Don't worry if you don't have it anymore - we will use your address and name to locate any accounts you had.

**Section B: about the sale of the PPI**

**B.1 when did you take out this PPI?**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	can't remember <input type="checkbox"/>
d	d	m	m	y	y	y	y	

**Section C: about your personal circumstances**

**Please note: This section should be completed in relation to your circumstances at the time you took out the PPI, NOT your current circumstances.**

**C.1 at the time you took out the PPI, what was your employment status?**

<input type="checkbox"/> employed (working 16 hours or more)	<input type="checkbox"/> working fewer than 16 hours
<input type="checkbox"/> self employed	<input type="checkbox"/> retired
<input type="checkbox"/> not working	<input type="checkbox"/> student in full-time or part-time education
<input type="checkbox"/> director of own company	<input type="checkbox"/> not known
<input type="checkbox"/> temporary / agency worker	<input type="checkbox"/> other

If you were a student but *also* had a job, how many hours were you working each week?

**C.2 if you were employed or self-employed at the time you took out the PPI, please answer the following regarding your employment:**

occupation	<input type="text"/>
employer(s) name	<input type="text"/>
gross annual income before tax	£ <input type="text"/>
time with employer	<input type="text"/> years <input type="text"/> months

**C.3 if you were employed at the time you took out the PPI, would you have received any pay from your employer, if you were off work due to an accident or sickness, or if you were made redundant?**

- Yes       No       Can't remember       Not relevant (as you were not employed)

**Please note:** Statutory sick pay (SSP) and statutory redundancy pay (SRP) are the minimum payments the government requires an employer to pay. SRP is paid dependant upon an individual's age and time in service, with up to a week and a half's pay per year in service. **We want to know whether you would have received anything in addition to SSP and SRP.**

*If "yes", please tell us in the two sections below what pay you would have received from your employer.*

**Sick pay:**

- I would have received statutory sick pay only
- I would have received additional benefit from my employer (please provide detail below)

*Generally speaking, when an employer provides an additional sickness benefit it is usually for a certain amount of time at a percentage of salary i.e. 1 month's salary at 100% and 1 month at 50%. You need to tell us what your employer would have paid you below.*

My employer would have paid me sick pay for  month(s) at  % of salary

then paid me a further (if applicable)  month(s) at  % of salary

- Other (please provide details in the space below)

**Redundancy pay:**

- I would have received statutory redundancy pay only
- I would have received additional benefit from my employer (please provide detail in the space below)
- Other (please provide details in the space below)

**C.4 has your employment status changed since you took out the PPI?**

- yes       no      *If "yes", please tell us how and when below.*

**C.5 if you had not been able to work at the time you took out the PPI (because you were ill, in an accident or had been made redundant), would you have had any other way of making your repayments?**

For example – from savings or other insurance policies.

yes  no

If “yes”, how would you have made your repayments, if you had not been able to work?

**Savings:**

yes  no

If “yes”, then please tell us about how much savings you had, how quickly they could be accessed and whether there was any penalty for doing so.

**Investments:**

yes  no

If “yes”, then please tell us about how much you had invested, what it was invested in, how quickly it could be accessed and whether there was any penalty for doing so.

**Other policy:**

yes  no

If “yes”, then please tell us about what this policy covered, how much it would have paid out and how long you would have had to wait before it paid out.

**Some other means:**

yes  no

If “yes”, then please tell us about what these other means were and how much was available to you.

**C.6 when you took out this PPI, did you have any health problems or were you registered as disabled?**

yes  no *If “yes”, please tell us more below.*

What was your condition / disability?  
*e.g. diabetes*

When did this condition start?  
*e.g. January 2005*

What time off work have you had to take?  
*e.g. one week in 2005, three weeks in total or none*

## Section D – About your Complaint

this page is for you to tell us anything else about your complaint, including what happened when you took out the PPI

For example, please tell us any details you remember about:

- the PPI Sale and your reasons for complaining

If you need more space, please use the section at the end of this questionnaire.

**tell us when you first realised there was a problem with the PPI and why you are now unhappy with it**

If you need more space, please use the spare page at the end of this questionnaire.

### Payment details

Should we need to make a payment to your bank account, please provide us with the bank account number and sort code number you wish us to make the payment. The bank account must be in your name (the cardholder) and to an account that accepts payment by BACS Direct Credit (e.g. a current account).

Bank Account Name:  
(Cardholder)

Bank Account Number:

Sort Code:

## Section E: your declaration

### Important

- You need to sign here – even if *someone else* is bringing the complaint on your behalf.
- If someone is complaining for you (e.g. a *relative or solicitor*), your signature here means you authorise the person named in Section A to represent you in this complaint.
- **(MBNA Loan/Loans.co.uk only)** If your loan is/was in joint names, both names and signatures are required. Please note that if both names and signatures are not provided, we will not be able to progress with your complaint.

### Declaration for MBNA credit card or MBNA loan:

*"I confirm I want to make a formal complaint about the sale of the Payment Protection Insurance (PPI) described in this questionnaire. I confirm that all the information I have given in this questionnaire is true and accurate to the best of my knowledge.*

*I consent to you using this information when decisioning my complaint. MBNA may store the information on its own internal systems located in the UK."*

*(MBNA will keep information about you for only as long as we need to or are allowed to by law.)*

\_\_\_\_\_

**your name**

\_\_\_\_\_

**your signature**

d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y

\_\_\_\_\_

**2nd applicant name (if applicable)**

\_\_\_\_\_

**2<sup>nd</sup> applicant signature**

### Declaration for a Loans.co.uk brokered loan:

*"I / We confirm I/we want to make a formal complaint about the sale of the Payment Protection Insurance (PPI) described in this questionnaire.*

*I / We confirm that all the information I/we have given in this questionnaire is true and accurate to the best of my knowledge. I/We consent to you using this information when decisioning my/our complaint. Loans.co.uk may store the information about you as long as we need to or are allowed to by law.*

*I / We authorise Loans.co.uk to contact my/our lender or insurance company, as necessary, to obtain information relating to my/our finance (including obtaining statements and/or transaction history as well as other information about the loan such as the interest rate and amount of repayments for example) or PPI policy.*

\_\_\_\_\_

**your name**

\_\_\_\_\_

**your signature**

d	d	m	m	y	y	y	y
d	d	m	m	y	y	y	y

\_\_\_\_\_

**2nd applicant name (if applicable)**

\_\_\_\_\_

**2<sup>nd</sup> applicant signature**

**Please use this page if you need more space**

question number	your answer