



PAK-QATAR FAMILY TAKAFUL
Together for Better

Complaint Form

Plan No		CNIC No:
Participant Name	Last. Middle. First.	
Telephone	Cell:	Land Line:
Best Time to Call		
Is the Complaint About <input type="checkbox"/> Branch Office Staff <input type="checkbox"/> Head Office Staff <input type="checkbox"/> Other _____ (Please Specify)		
Please Describe particulars of the person involved (If known)	Name	
	Designation	
	Address	
Have You Discussed the matter with a staff member: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes When:		
Who Dealt With		
What was the result		
Please Give detail of the complaint and the outcome you are seeking (you may attach documents to this form)		
Date: Signatures: _____ You may email this form to iftakaful@pakqatar.com.pk or mail it to Manager -PBS Pak-Qatar Family Takaful Ltd. 102-105, Business Arcade PECHS Block 6 Shahrah-e-Faisal Karachi 021-111-(Takaful) 825-238		