



Complaint Form

AK-ML-FM-051

Rev. 0

Date: 13.09.2018

If you would like to raise an official complaint to Al Koot Insurance & Reinsurance, please complete the following details and return signed form to Al Koot Insurance at Al Maha building, Bin Omran Area or via email complaints@alkoot-medical.com

For any assistance, please call our 24/7 Customer Care team at +974 4040 2000 or customer care@alkoot-medical.com

Full name:	
Company name:	
Al Koot ID:	
Tel:	Email:

Please provide details of your complaint mentioning specific dates, names, locations and/or pre-approval/claim numbers if applicable.

Signature: _____

Received by: _____

Date: / /

Date: / /

For internal staff

Complaint Ref #