



**HOLDING LIMITED**

**COMPLAINTS HANDLING  
POLICY**

# COMPLAINT HANDLING POLICY

OBO Holding Limited is a trademark of OBO Holding Limited Group. OBO Holding Limited Ltd (hereinafter the 'Company') aims to provide superior investment and ancillary services to all of its Clients.

## Definition

The Company classifies a complaint as any objection and/or dissatisfaction that the Client may have with regards to the provision of any investment and/or ancillary service provided by the Company. A complaint form is provided on page 3 of this Policy.

## Procedure

The Compliance Department shall be responsible for handling Client complaints, except in the case where the complaint involves the Compliance Department, whereby the complaint shall be handled by the Representative Officer.

The Client may register a complaint by completing the complaint form and submitting the form using any of the following options:

□ Email: [complaints@obohfx.com](mailto:complaints@obohfx.com)

1. A written acknowledgement will be sent to the Client within 5 business days of receipt of a complaint by the Compliance Department;
2. Within 8 weeks from the date that the Compliance Department receives the Client's complaint, a final response or a holding response will be sent to the Complainant explaining the findings of the investigation. In the case where a holding response is sent to the Complainant, then an explanation shall be given stating the reasons why the Company has not been able to resolve the complaint as well as giving an estimated time to resolve the issue;
3. If after 8 weeks of receiving the complaint we are still not in a position to resolve the issue then the Compliance Department will notify the Client in writing stating the reasons for the delay and indicate an estimated time to resolve the issue;
4. A final response should be provided to the Client within 12 weeks from the date he submitted his complaint;

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5. When the complainant has received the final response, he will have 8 weeks to respond. If no response has been received from the Complainant, then the Complaint will be considered as resolved.

6. In the case where the complainant is still not satisfied with the Company's final response, then the complainant can refer his complaint with a copy of the Company's final response to the competent authorities for further investigation.

Contact details for the Financial Services Authority (FSA) Seychelles are set out below:

### Client Records

The Client should provide all relevant documentations as well as any additional information requested by the Compliance Department in order to ensure all records are collected and the complaint is properly resolved on time.

All records will be kept safe as per local requirements and for a period of seven (7) years.

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## COMPLAINT FORM

### A. Client Information:

|          |                   |
|----------|-------------------|
| Name:    | Account Number:   |
| Address: | Telephone Number: |

### B. Brief Summary of the Complaint:

Please describe the product or service you are complaining about (description, evidence, amount and suggested way to be solved):

|   |
|---|
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|---|

- Please enclose any other relevant documentation that may help us to handle the complaint.
- Possible documentation to be provided (client statement, correspondence with the Company as well as any other supporting documentation to be requested by the Compliance Department which is relevant to the Client's complaint)

\_\_\_\_\_  
Date and place

\_\_\_\_\_  
Client Signature

#### For internal use only:

|  |   |
|--|---|
| Complaint Received By:                                 | Date: <input type="checkbox"/> Yes - <input type="checkbox"/> No <input type="checkbox"/> |
| Acknowledgement sent to Client within 48hrs:           | Yes - <input type="checkbox"/> No   |
| Informed Client of initial action:                     | <input type="checkbox"/> Yes - <input type="checkbox"/> No                                |
| Final response provided to Client within 4 weeks:      | <input type="checkbox"/> Yes - <input type="checkbox"/> No - <input type="checkbox"/> N/A |
| Holding response provided to Client:                   |   |
| List of further actions taken as per holding response: |   |
| Signature of Compliance Department:                    | Date:   |