

Details if someone is complaining on your behalf?

3G Their name

3H Their address

Post code

3I Their reference

3J Their phone number

3K Their Email

4 Your circumstances at the date of sale

Date of sale found in Section 2

•4A What was your employment status?

- | | |
|--|--|
| <input type="checkbox"/> Employed | <input type="checkbox"/> Temporary/Agency worker |
| <input type="checkbox"/> Student in full-time or part-time education | <input type="checkbox"/> Student – and working 16 or more hours per week |
| <input type="checkbox"/> Working fewer than 16 hours | <input type="checkbox"/> Working in Armed/Police forces |
| <input type="checkbox"/> Director – but not of own company | <input type="checkbox"/> Not known |
| <input type="checkbox"/> Self employed | <input type="checkbox"/> Director of own company |

Please provide evidence such as letter from tax office (HMRC*) showing that you were paying **CLASS 2 or CLASS 4 NATIONAL INSURANCE**. This must be for the same tax year you were sold PPI.

- | | |
|--------------------------------------|----------------------------------|
| <input type="checkbox"/> Not working | <input type="checkbox"/> Retired |
|--------------------------------------|----------------------------------|

Please provide evidence such as letter from tax office (HMRC*) showing that you were not paying any **NATIONAL INSURANCE** contributions. This must be for the same tax year you were sold PPI.

Please skip to Section 5A.

- Other

*HMRC are able to provide information for you if you no longer have it available. Please contact them by visiting [gov.uk/contact-hmrc](https://www.gov.uk/contact-hmrc) to request your income information.

•4B What was your occupation?

•4C Name of employer

•4D When did you start there? When did you leave there? I still work there

•4E How much did you earn a year?

£

If you were employed at the date of sale

•4F Would you have received any pay from your employer if you were off work due to sickness, accident or redundancy?

- Yes No
 Can't remember

4G If 'Yes' how much would you have received?

- No pay (or statutory pay) Worth less than 3 months pay
 Worth 3 months to 6 months pay Worth 12 months pay or more
 Worth 6 months to 12 months pay Other (please tell us more below)

Please provide evidence such as a letter from your employer or your contract of employment which confirms your sick pay allowance or redundancy allowance at the date of sale.

If you had no income after the date of sale

•4H After paying your essential bills, how would you have made your payments to Capital One?

- No other means to pay Capital One credit card payments

From savings and insurance:

- Worth less than 3 full months of your pay Worth 6 months to 12 months of your pay
 Worth 3 months to 6 full months of your pay Worth 12 months or more of your pay
 By some other means (please tell us more below)

Please provide evidence such as an insurance policy document which would pay your Capital One credit card payments, banks statements or saving records at the time of sale.

•4I Have you ever entered into any of these insolvency arrangements?

- Bankruptcy Debt Relief Order (DRO)
 Individual Voluntary Agreement (IVA) Debt Arrangement Scheme (DAS)
 Trust deed No
 Sequestration Other (tell us more below)

You have a legal obligation to inform us of your financial status. Capital One has a legal obligation to ensure that any money paid as a result of your complaint is paid to the correct party, for example your trustee in bankruptcy.

7 Your declaration

I certify I want to make a formal complaint about the sale of PPI. I certify that all the information I have given in the questionnaire is true and accurate to the best of my knowledge.

•7A Signature

•7B Date

Change of name?

If your name is different to when you had your Capital One account please provide us with your old and new signature along with a copy of the relevant documents to support the name change – for example:

- Marriage certificate
- Deed poll certificate
- Decree absolute

Important information – before you send us your form

Make sure you have:

- Completed all sections and answered all the questions to the best of your ability
- Signed the form
- Provided a daytime telephone number in section 3E in case we need to contact you

If required you should have included:

- Evidence of any sick pay allowance from your employer at the date of sale
- Evidence of any savings and/or insurance policies you had to cover your Capital One repayments at the date of sale
- Evidence of any health conditions which you have suffered from at the date of sale
- Documentation of any previous claims made
- Evidence of self employment at the date of sale
- Proof of name change if relevant

If you're sending additional documentation, please only send copies as we're unable to return original documents.

What's next?



Please return your form to:

Capital One
P.O. Box 5281
Nottingham
NG2 3HX

When we have your complaint

We may contact you to request further information as part of our review.

When we have a decision

We will aim to get back to you within 8 weeks of receiving your complaint.