



YOUR PERSONAL MISSELLING PPI CLAIMS PACK



CLAIMLINE UK LTD

GENUINE NO WIN NO FEE CLAIMS

Regulated by the Ministry of Justice in respect of Claims Management Activities

Authorisation CRM11649



IMPORTANT INFORMATION

Thank you for trusting your PPI claim with Claimline UK Ltd. If you have taken out a mortgage, credit card, consolidation loan, car loan or any kind of finance agreement within the last 6 years the chances are the salesperson would have tried to sell you a payment protection insurance policy (PPI) at the same time. Whilst PPI is not a bad thing, the commission rewards to the sales person are substantial.

The Financial Ombudsman estimates that of the 20 million PPI policies in existence up to 50% could have been missold meaning you could be in line for compensation from your policy.

The Insurance Ombudsman has already fined many household names like **Capital One, GE Capital, HFC Bank, Loans.co.uk, Liverpool Victoria and Land of Leather** for misselling PPI policies.

Misseling example - **potentially the worst-ever case to date was a couple charged £22,568 to insure a £56,000 loan. The £22,568 was reclaimed. This could be you !**

(Mail on Sunday 21/09/2008)

IN THIS PACK

> Letter Of Authority

Please sign & return. This gives us authority to work on your behalf.

> Questionnaire & Statement of Events

Please complete & return. This confirms any misselling reasons and gives your side of the story.

The information you provide will help us build your case into a successful claim.

> Ombudsman's Declaration

We ask you to pre-sign this to save time should we take your case to the Financial Ombudsman Service.

WHY CLAIMLINE

To protect their profits finance companies employ teams of legal staff to deflect your claim. Any claim can be a legal minefield meaning it could be delayed by months, or at worst turned down altogether.

Claimline UK has the experience and support to represent your case from beginning to end. Our legal panel will cut through the "smoke and mirrors" to get your case settled as quickly as we can.

Claimline UK works on a **NO WIN NO FEE** basis.

Claimline UK does not charge upfront fees.

Please be patient. Your claim may take a number of weeks to process owing to the vast number of claims now being made against the insurance companies.

Now complete all **shaded sections**



LETTER OF AUTHORITY

Please complete, sign and return

Name of policy holder (1)

Name of policy holder (2)

Address:

Post Code:

Name of company policy is held with:

Payment Protection policy number:

To whom it may concern

I/we appoint and expressly authorise Claimline UK Ltd to consider our claim for mis-sold Payment Protection Insurance and seek compensation in accordance with DISP 2.4.16 R of the FSA Handbook, 'A compliant may be brought on behalf of an eligible complainant, or a deceased person who would have been an eligible complainant, by a person authorised by the eligible complainant or authorised by law' if the company believes the case warrants such action.

I/we further authorise and insist that you the firm and/or licensee(s) release to the company any information that may be requested from time to time, whether that be in writing, by phone, email, fax or as directed, in accordance with the 'Rights of Data Subjects and Other' under the Data Protection Act 1998.

I/we hereby give our express consent and insist for any sum awarded to be paid to Claimline UK Ltd acting on my/our behalf, as provided for under section 47B of the Enterprise Act 2002 which will then be forwarded to me/us.

Payments "must" be made in the name of Claimline UK Ltd and be delivered or electronically transferred directly to them, and not to the person named on the policy or their client account.

Please be advised that any willful failure to comply with these instructions, or to comply with any other subsequent instructions made by Claimline UK Ltd, whom I/we have legally contracted, within the legal requirements as set out by the Competition Act 1988, the Enterprise Act 2002 and Articles 81 and 82 of the EC Treaty may leave you the firm, or licensee(s) open to legal recourse.

I/we confirm that the information given in this letter is accurate and any copy of this Letter of Authority has the validity of the original.

Signature (1)

Print name (1)

Signature (2)

Print name (2)

Date:

Date:



TERMS AND CONDITIONS

Please sign and return

<p>(1) Definitions: “Institution” or Company” – the company who sold you the policy “client(s)” – the named policy holder(s) “claim(s)” – the clients claim(s) against the “company” “compensation” – any compensatory deposit or final settlement in respect of this matter “representative” – means Claimline UK Limited “fee” – the amount which Claimline UK Limited is paid for representing the client in this matter “services” – the services provided on behalf of the client</p> <p>(2) Conduct: 2.1 Having read our terms and conditions and returning the Letter of Authority the client agrees to let us act of their behalf and be bound by such terms and conditions. 2.2 By signing and returning the Letter of Authority the client agrees to indemnify the representative against any actions, claims, losses, damages or proceedings (whether personal or business) that may come about from this claim. 2.3 By signing and returning the Letter of Authority the client agrees to answer all questions openly and honestly and to declare any incidence of fraudulent activity or past criminal activity which may have an effect on this claim. Failure to do so will render this agreement invalid and the client will still be liable for the minimum costs involved. 2.4 By signing and returning this agreement the client instructs the representative to deal directly with the company and to retain any compensation paid out in full and deduct the fee before forwarding on the remainder of the compensation. 2.5 The client agrees the representative has the exclusive right to deal with the claim, and the representative has the right to issue a minimum administrative fee of £250 + VAT to the client should it be made aware another party is involved in the claim. 2.6 Where the issuing company requests a fee to produce duplicate policy documents or administer this claim, the client agrees to pay the company directly. Claimline UK will pass this on at cost and will not charge a fee for administering this work.</p> <p>(3) Cancellation and Complaints: 3.1 The client shall have a 15 day period, from the date of signing the declaration, in which they can cancel this agreement without cost. 3.2 All cancellations must be made in writing to: Claimline UK Limited, County House, 221 – 241 Beckenham Road, Beckenham, Kent. BR3 4UF. 3.3 Should the client terminate the contract for any reason or execute their own claim against the company (whether they win compensation or not) outside the 15 day cool-off period, the client shall pay the representative the minimum administrative set-up fee of £250 + VAT. 3.4 If, at anytime you are unhappy with our conduct or decisions you must put your concerns in writing to: Claimline UK Limited, Compliance Officer, County House, 221-241 Beckenham Road, Beckenham. BR3 4UF.</p> <p>(4) Representation: We the representative will make all reasonable endeavours to ensure the client receives the maximum compensation from the company.</p>	<p>4.2 The representative will not accept liability for any rejected or unsuccessful claims, or compensation paid to the client. 4.3 The representative reserves the right to use its judgement and decide at any time whether to accept any offer made. 4.4 The representative reserves the right to decide at any time whether the claim shall proceed, or to cancel any further proceedings should they be in progress. 4.5 We shall communicate any decisions and progress to the client at the earliest opportunity. 4.6 Upon conclusion of a successful claim the representative shall invoice a fee at 20% + VAT from the compensation paid. 4.7 A successful claim is deemed either where compensation is received by the client as a direct payment, payment is returned to their client account or payment is offset against any outstanding loans or debts to the company. 4.8 Where payment is received by Claimline UK we will deduct our fee and make payment to the client as soon as is practical once the entire claim has been settled. 4.9 Where payment is received by the client directly, in their account or offset against any debts or loans, the client will be invoiced by the representative and shall forward the fee due within 14 days of receipt of invoice. 4.10 The representative reserves the right to charge a late payment fee of 5% of outstanding fees on a monthly basis.</p> <p>(5) Disclaimer: 5.1 The representative shall not be liable to you, the company or any other party with respect to this claim or action taken in respect of this claim. 5.2 The representative shall not be liable for any client loss or costs whether personal / business in connection with this claim. 5.3 You will be liable to the representative and agree to indemnify the representative against all actions, claims, costs, damages, demands, expenses, liabilities, losses and proceedings directly or indirectly incurs or which are brought against the representative if you have acted fraudulently, been negligent or breached your agreement. The representative will not be held responsible for any action taken by your financial institution as a result of any claim made on your behalf. 5.4 The client is fully aware they have the opportunity to pursue this claim with the company and contact the Financial Ombudsman direct without charge, but has elected to use Claimline UK as their sole representative. 5.5 The client agrees that any debt or liability incurred by you in respect of this claim will be your sole responsibility.</p> <p>(6) Data Protection 6.1 The client will offer all data as required, and to the best of their knowledge this data shall be truthful. 6.2 The representative shall store and use this data for the purposes of this claim and where instructed to do so pass the data on to the company, or any of its representatives. 6.3 The client can at anytime contact the representative and request details of how and where the data is stored. 6.4 The representative may offer this data to a Court of Law or Law Enforcement Officer should they be requested to do so.</p> <p>(7) Governing Law 7.1 This agreement is subject to the laws and jurisdiction of England and Wales.</p>
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I/we the client(s) have read and understand the terms and conditions of this agreement and by signing below confirm our acceptance. We have read and agree to the Data Protection statement.

Signature (1):

Signature (2):

Date:



PPI QUESTIONNAIRE

Please complete and return

- You will require a separate form for each separate policy claim
- If it is a joint policy we will need details and signatures from both parties
- Most information can be found on your policy document

YOUR DETAILS

Name (1)

Telephone Number:

Email Address:

Date of Birth:

Name (2)

Telephone Number:

Email Address:

Date of Birth:

ABOUT YOUR PAYMENT PROTECTION POLICY

What is the name of the company who sold you the policy?

What was the policy for?

How much was the finance/loan for?

£

How long was the period of the finance/loan?

What was the date of the first policy payment?

How much do you pay monthly for the policy?

£

Is the finance/loan still running or has this been paid off? If so, please state date paid off.

Are you up-to-date with your payments? { Y / N }

Do you have any other outstanding loans / debts or arrears with this company? { Y / N }

Please state total amount £

Have you tried to claim against this policy before? { Y / N }

If yes, please enclose copies of all correspondence with this claim pack



MISSELLING CHECKLIST

Please tick and return

When you were sold your payment protection insurance policy the advisor should have ensured the policy was suitable for your circumstances, and that you were given the correct advice at the time. Tick if any of the following were applicable.

I was not in work or I was self employed at the time of sale	<input type="checkbox"/>
I was told I had to take out the PPI policy at the time of the loan	<input type="checkbox"/>
I was not asked whether I had any other insurance which could cover the loan	<input type="checkbox"/>
I was not told I could buy PPI cover elsewhere to cover the loan	<input type="checkbox"/>
I was sold a policy which had age restrictions which I fell or will fall outside of at some point	<input type="checkbox"/>
I was led to believe Payment Protection Insurance was compulsory	<input type="checkbox"/>
I was told I would stand more chance of being accepted if I took out PPI	<input type="checkbox"/>
It was not explained to me that there could be certain exclusions to the policy	<input type="checkbox"/>
I felt pressured into buying the PPI policy	<input type="checkbox"/>
I was being treated for a pre-existing medical condition or mental illness which was not discussed (if you tick this box please outline your condition in the Statement of Events section)	<input type="checkbox"/>
My PPI was an upfront premium, I repaid the loan early and received no refund	<input type="checkbox"/>
I had a personal loan which increased and the PPI was increased automatically	<input type="checkbox"/>
The terms and conditions or small print was not fully explained to you	<input type="checkbox"/>
Declaration: I/we confirm we have completed the questionnaire to the best of my/our knowledge, and confirm it was a true account of the advice given.	
Signature (1):	Signature (2):
	Date:



STATEMENT OF EVENTS

For the benefit of your claim we require a statement regarding the circumstances under which your disputed policy was sold to you. Please take time to complete and return this statement along with your claims forms.

If you can recall specific details of the circumstances under which your policy was sold, what it covered, conversations with the salesperson or your concerns at the point of sale, please include them within the statement - It is necessary to the progression of your claim and any details you can provide will help to support your claim further.

Finally, please also state if you are currently facing any financial hardship. Arrears of any kind or repossession, and include copies of statements and creditor letters supporting this.

If you are claiming on several policies, please complete a declaration for each policy.

Name of PPI Policy Provider:	Policy Number:
I believe I was missold this payment protection policy because:	

Declaration: I/we confirm we have completed the statement to the best of my/our knowledge, and confirm it was a true account of the events in the sale of my/our PPI policy.

Signature (1):

Signature (2):

Date:



FINAL CHECKLIST

Have you read, completed and signed:

- Letter of Authority
- Terms & Conditions
- PPI Questionnaire
- Misselling Checklist
- Statement of Events
- Declaration for the Financial Ombudsman

To help us complete your case file, please sign, date and return the Financial Ombudsman's declaration (page 8) and return to us, NOT TO THE OMBUDSMAN AS SHOWN ON THE PAGE

Have you also included:

- Copies of All Your Policy Documents

Please ensure you enclose photocopies of any policy documents you have, and any previous correspondence you have had with the company concerned over this policy.

These assists us when compiling your case for compensation.

Please return your completed claim pack to:

**Claimline UK Limited
County House
221-241 Beckenham Road
Beckenham
Kent BR3 4UF**

Once received we will process your claim immediately and you should hear from us within 4-6 weeks. However, please be patient. Your policy seller may take a number of weeks to process your claim owing to the increasing number of claims being made against insurance companies.

SHOULD YOU HAVE ANY FURTHER QUESTIONS OR NEED HELP COMPLETING THE FORMS PLEASE CONTACT US ON 020 8663 1838

or email us at enquiries@claimlineuk.co.uk