



Thank you for contacting the Financial Institutions Commissions (FICOM). Your complaint is important to us as it might be the first indicator of a potential market conduct issue. We carefully consider each complaint and may take action if we identify a breach of the Credit Union Incorporation Act, Financial Institutions Act, or other legislation. We may also refer complaints to other regulatory bodies when appropriate. FICOM will assess whether complaints result in an investigation or public sanction.

FICOM ensures that credit unions and trust companies have appropriate authorizations in place to conduct business in BC. We enforce compliance with legislative requirements that govern, for example, annual general meeting notices, voting practices, false or misleading advertising, and unfair contracts. FICOM more generally ensures that credit unions and trust companies do not engage in acts and conduct that might reasonably harm the interests of depositors.

While FICOM does not generally intervene in individual disputes, service quality issues, and business decisions made by institutions, complaints from consumers on these and other issues may be indicative of market conduct issues FICOM will pursue.

FICOM will accept complaints in any format, however completing this form ensures adequate information is provided initially and allows for more efficient processing of complaints.

Please contact us at 604 660 3405 / CUandTrusts@ficombc.ca with any questions about our role and your complaint.

This form will expand as you complete the sections, however if you do run out of space, please attach further particulars. You can complete this form and send it, with all necessary attachments by email to: CUandTrusts@ficombc.ca.

Section 1: Your Information

Form with fields for Last Name, First Name, Mailing Address, City & Postal Code, Phone Number, Secondary Phone Number, Email Address, and contact preferences.

**COMPLAINT INFORMATION**

**Section 2: Subject of the Complaint**

Credit Union or Trust Co:			
Name of Employee:			
Mailing Address:		City:	
Phone Number:		Postal Code:	
Email Address:			

**Section 3: What is the Complaint About?**

Please briefly describe what wrongdoing is alleged.

**Section 4: Details**

Please provide details of the complaint including dates as available. Include key meetings, communications (phone, e-mail, in person), other parties involved, key decisions, document exchanges, activity location, and other information that will help us understand and evaluate your complaint.

Date:	Event:

**Section 5: Supporting Documents**

It is important that you provide evidence to support your allegations. We ask that you attach copies of the documents to support the complaint. This can include the membership agreements, any relevant documents issued by the institution, and any correspondence between you and the institution. You should retain the original documents for your own records. However, we may need your original documents for an enforcement proceeding (we will notify you if that becomes necessary).

# COMPLAINT INFORMATION

## Section 6: Other Parties

Please provide information about other individuals/parties who can provide information in relation to your complaint.

Name:	Contact Information (phone/e-mail):	Name:	Contact Information (phone/e-mail):

## Section 7: Other Actions You've Taken

Have you made a complaint with the credit union, trust company, other regulatory agencies, or industry groups?

Yes  No

If yes, please provide details (e.g. response from institution, agency/group, status of complaint, key dates, etc.).

*Please provide supporting documents.*

If not, please provide the reason:

Are you involved in legal action related to issues raised in your complaint? Yes  No

Details (e.g. type of legal action, parties, status, key dates, etc.).

Please provide supporting documents as relevant. We encourage you to consult your legal counsel beforehand.

[CUandTrusts@ficombc.ca](mailto:CUandTrusts@ficombc.ca)

Phone – 604 660 3405 / Fax – 604 660 3365

Financial Institutions Commission

Suite 2800 - 555 West Hastings

Vancouver, BC V6B 4N6

*Freedom of Information and Protection of Privacy Act (FOIPPA):* The information requested on this form is collected under the authority of, and used for the purpose of administering the *Financial Institutions Act, Credit Union Incorporation Act*. Complaints are treated on a confidential basis and maintained as such subject to enforcement proceeding requirements and FOIPPA. If you have any questions about the collection or use of this information, contact the Freedom of Information Coordinator at 604 660-3555, Suite 2800, 555 West Hastings Street, Vancouver, BC V6B 4N6.