We refer to the telephone conversation between yourself and [\_\_\_\_\_] from our office on [\_\_\_\_\_].

We also refer to our letter to you dated [\_\_\_\_\_] and note that we haven't had a response. Accordingly, we will proceed to close your file.

If you still want to consider making a superannuation/insurance claim, please contact [\_\_\_\_\_] on [\_\_\_\_\_] as soon as possible.

**Time Limits**

There are strict time limits associated with Insurance claims. If you want to commence Court proceedings against the Insurer, then you must do so within six years of the cause of action arising. Identifying this date can be difficult, and varies depending on the insurance policy that applies to you.

As a matter of caution, we recommend that you commence Court proceedings within six years from the date you ceased work because of your injuries, which you advised was [\_\_\_\_\_]. Accordingly, if you wish to get a second opinion about your claim, we recommend that you do so before [\_\_\_\_\_], being six years from the date you instructed us you ceased work.

There may be instances where you will be able to issue Court Proceedings after that date. We recommend you get alternate legal advice without delay.

As an alternative to Court action, you can lodge a complaint with the Australian Financial Complaints Authority (AFCA).

You must lodge your complaint with AFCA within six years from the date you became aware (or should have become aware) of your right to the claimed benefit. If you have already complained to the Insurer, then you must lodge a complaint to AFCA within two years of the Insurer’s response. The earlier of these two dates is the date you must comply with.

As with Court proceedings, there may be instances where the AFCA can consider your complaint after these dates. If you decide to get a second opinion, make sure you do so without delay.

There is **NO CHARGE** for advice and a first appointment in a new matter if you don’t win the claim.