

Complaints Handling Policy

1. Introduction

Nexify Capital Limited, trading as CTZ Markets (the “Company”), is committed to providing high-quality investment services and to handling customer complaints fairly, promptly, and transparently.

This Complaints Handling Policy (“Policy”) sets out the procedures for receiving, investigating, and resolving complaints in accordance with applicable Seychelles Financial Services Authority (“FSA”) requirements.

2. Appointment of Responsible Officer

The Company has appointed a Compliance Officer who is responsible for the effective handling of all customer complaints.

Where a complaint concerns the Compliance Officer, the matter shall be handled by the Company’s Representative Officer to ensure independence and objectivity.

3. Definition of a Complaint

For the purposes of this Policy, a complaint is defined as:

Any expression of dissatisfaction, whether oral or written, made by a customer or prospective customer relating to the provision of investment or ancillary services by the Company.

A standard Complaint Form is included at the end of this Policy; however, customers are not required to use the form in order to submit a complaint.

4. Submission of Complaints

Customers may submit a complaint using any of the following methods:

- Email: support@ctzmarkets.com
- Postal Address:
Nexify Capital Limited
Office No. 14, Avenue Diolinda
Providence Estate, ABIS Centre 1
Mahé, Seychelles

Complaints may be submitted in writing or electronically and must include sufficient detail to enable proper investigation.

5. Complaints Handling Procedure

Upon receipt of a complaint, the Company shall follow the procedure outlined below:

1. Acknowledgement - The Company will acknowledge receipt of the complaint in writing within seven (7) business days.
2. Investigation - The Compliance Officer will investigate the complaint fairly and impartially, requesting additional information from the customer where necessary.
3. Final Response - The Company will aim to issue a final written response within thirty (30) business days of receipt of the complaint.
4. Delay Notification - Where the investigation cannot be completed within thirty (30) business days, the Company will inform the customer in writing of:
 - The reasons for the delay; and
 - The expected timeframe for providing a final response.
5. Maximum Resolution Timeframe - In all cases, a final response will be provided no later than sixty (60) business days from the date the complaint was submitted.

6. Escalation to the Financial Services Authority

If the customer is not satisfied with the Company's final response, or if the complaint has not been resolved within the prescribed timeframe, the customer may refer the complaint to the Financial Services Authority of Seychelles.

The complaint should be submitted together with a copy of the Company's final response.

FSA Contact Details

Financial Services Authority (Seychelles)

Address: PO Box 991

Bois de Rose Avenue

Roche Caiman, Victoria

Mahé, Republic of Seychelles

Phone: (+248) 438 08 00

Fax: (+248) 438 08 88

Email: complaints@fsaseychelles.sc

Website: fsaseychelles.sc

7. Customer Cooperation and Records

Customers are expected to provide all relevant documentation and information reasonably requested by the Compliance Officer to facilitate the investigation and timely resolution of the complaint.

The Company shall:

- Maintain a complaints register;
- Retain all complaint-related records securely;
- Keep such records for a minimum period of five (5) years, in accordance with Seychelles regulatory requirements.

8. Confidentiality

All complaints and related information will be handled confidentially and in accordance with applicable data protection and confidentiality obligations.

9. Complaint Form

A Complaint Form is provided below for convenience.

Complaint Form

A. Client Information

Name:

Account Number:

Address:

Telephone Number:

B. Complaint Details

Please describe the nature of your complaint, including:

- The product or service concerned
- Relevant dates
- Amounts involved (if applicable)
- Supporting evidence
- Desired resolution

(Please attach any relevant documentation.)

Date and Place: _____

Client Signature: _____



For Internal Use Only

Complaint Received By:

Date Received:

Acknowledgement Sent: ☐ Yes ☐ No

Initial Action Taken: ☐ Yes ☐ No

Holding Response Issued: ☐ Yes ☐ No ☐ N/A

Final Response Issued: ☐ Yes ☐ No

Compliance Officer Signature:

Date: