



## Lost Policy Declaration

Policy Details	
Date (dd/mm/yyyy)	/ /
Policy number	
Policy holder	
On the life/lives of	

Declaration	
I/we, the undersigned, do solemnly and sincerely declare that:	
1. I am/we are legally entitled to the above mentioned Policy/Policies and to the monies assured thereby and to effect discharge for the same.	
2. Describe the lost documents and how it has been lost. <i>Please give as much details as possible, including dates if possible:</i>	
I/We have searched for the documents, but without success	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/We know for a fact that the documents has been destroyed	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. The said Policy/Policies has/have not, to the best of my/our knowledge and belief, been pledged, assigned or otherwise parted with for value or otherwise to any person(s) who has or could have any right, title or claim as against or paramount to my/our title, and I/we have not received notice of and am/are not aware of any such claim.	
4. I/We undertake and agree that, in consideration of the Company issuing substitute documentation and/or affecting any policy transaction and/or settling a clam without requiring production of the original documentation I/we shall jointly and severally hold the Company indemnified against all claims, demands or losses which may be incurred as a result of having issued such substitute documentation and/or effecting any policy transaction and/or settling a claim.	
5. In the event of the whereabouts of the original documentation being discovered, I/we shall return the said substitute documentation, or where a claim has been settled, the original documentation, to the Company.	
6. There is no Bankruptcy Order against the Policyholder or me/any of us, nor is the Policyholder or me/any of us undischarged bankrupt.	



**I/We make this solemn declaration conscientiously believing the same to be true.**

<b>Name Policy Holder1</b>	
<b>Signature Policy Holder 1</b>	
<b>Passport/National ID Number</b>	
<b>Date (dd/mm/yyyy)</b>	/ /
Name Policy Holder (2)	
Signature Policy Holder (2)	
Passport/National ID Number	
<b>Date (dd/mm/yyyy)</b>	/ /

**Verification of Policy Holder(s) Identity**

Before me Solicitor/Commissioner for Oaths/Notary Public

<b>Full Name</b>	
<b>Address</b>	
<b>Signature</b>	
<b>Date (dd/mm/yyyy)</b>	/ /

**Stamp**

