

LAPSE VALUE CLAIM FORM

Utmost Wealth Solutions is the brand name used by a number of Utmost companies. This item has been issued by Utmost PanEurope dac.

IMPORTANT NOTES

HOW TO COMPLETE THIS FORM

Section A, B & D must be completed by all applicants.

This form should be completed using **blue or black ink** and **BLOCK CAPITALS**. If you make a mistake, cross it out, put in the correct words and sign your initials next to the correction. **Do not use correction fluid.**

HOW WE USE YOUR INFORMATION

Our Privacy Statement explains when and why we collect personal information about our customers, how we use it, the conditions under which we may share it with others and how we keep it secure. It also explains how long we keep customer information for, how a customer can obtain details of the information we keep and the choices customers have about how we use that information. You can find a copy at www.utmostinternational.com/privacy-statements or you can request a copy from our Client Relations Team.

WHAT TO DO WHEN YOU HAVE COMPLETED THIS FORM

Return the completed form, by post, to Utmost PanEurope dac.

Utmost PanEurope dac, 16 Joyce Way, Park West Business Park, Dublin 12, Ireland.

A APPLICANT DETAILS

	Applicant 1	Applicant 2
Title (Mr, Mrs, Miss or Other)	<input type="text"/>	<input type="text"/>
1 Full name	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
2 Present address (if different from that on the original application)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Postcode	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
3 Existing policy number	<input type="text"/>	

A WEALTH *of* DIFFERENCE

www.utmostinternational.com

Calls may be monitored and recorded for training purposes and to avoid misunderstandings.

Utmost PanEurope dac is regulated by the Central Bank of Ireland (No 311420). Its registered office is Navan Business Park, Athlumney, Navan, Co. Meath C15 CCW8, Ireland. Utmost PanEurope dac is a Category A Insurance Permit holder with the Jersey Financial Services Commission.

Utmost Wealth Solutions is registered in Ireland as a business name of Utmost PanEurope dac.

UIC PR 00180 | 11/22

B ENCASHMENT DETAILS

Full Payment

C PAYEE DETAILS

Bank / Building Society Name

Branch Address

Postcode -

Account Name

Account Number

Sort code - - (must be 6 digits)

Building Society Roll Number/
Reference


SWIFT code

IBAN

D DECLARATION - MUST BE COMPLETED BY ALL APPLICANTS

I/We wish to claim the cash in value of the above policy at the date of lapse together with late payment interest in full and final settlement of my policy.

	Applicant 1 (or titleholder if different)	Applicant 2 (or titleholder if different)
SIGNATURE	<input type="text"/>	<input type="text"/>
Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

If the policy is assigned or written in trust, any assignee or additional trustee must also sign this form. 

ADDITIONAL INFORMATION REQUIRED TO CLAIM CASH IN VALUE:

- › Original policy document/schedule **(or)**
- › Fully completed Lost Policy Declaration (overleaf)
- › If you have recently moved house - proof of address - i.e. utility bill (dated within last 3 months)
- › If you have married since you took out the policy and are using your married name, please provide a copy of your marriage certificate.

LOST POLICY DECLARATION FORM

This form must be completed using **blue or black ink** and **BLOCK CAPITALS**. If you make a mistake, cross it out, put in the correct words and sign your initials next to the correction. **Do not use correction fluid.**

STEP 1 - POLICY DETAILS

Policy number	<input type="text"/>
Contract type	<input type="text"/>

STEP 2 - OWNERS OF THE POLICY

	Owner 1	Owner 2 (if any)
Title (Mr, Mrs, Miss or Other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames (in full)	<input type="text"/>	<input type="text"/>
Address (for correspondence)	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>

	Owner 3 (if any)	Owner 4 (if any)
Title (Mr, Mrs, Miss or Other)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Forenames (in full)	<input type="text"/>	<input type="text"/>
Address (for correspondence)	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>

STEP 3 - DECLARATION

- › I declare that the policy schedule has been lost and that I am the legal owner of the policy and I am legally entitled to the proceeds of the above policy
- › The policy has not been assigned, pledged as security or given to any person who could have any claim upon it
- › I will return the policy schedule to Utmost PanEurope dac if this is found
- › I will indemnify Utmost PanEurope dac against any claim and any loss or expense which it may incur in consequence of the above not being true and/or payment of the maturity proceeds being made without the policy schedule being returned to Utmost PanEurope dac.

	Owner - Authorised Signatory 1	Owner - Authorised Signatory 2
SIGNATURE	<input type="text"/>	<input type="text"/>
Date	<input type="text" value="d d m m y y y y"/>	<input type="text" value="d d m m y y y y"/>

	Owner - Authorised Signatory 3	Owner - Authorised Signatory 4
SIGNATURE	<input type="text"/>	<input type="text"/>
Date	<input type="text" value="d d m m y y y y"/>	<input type="text" value="d d m m y y y y"/>