



Nico Life Insurance Company Limited

NICO House, P.O. Box 3044, Blantyre, Malawi.
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Email:nicolife@nico-life.com

LOST POLICY AFFIDAVIT

To be completed before a Commissioner for Oaths.

I, the undersigned
(Names in full)

hereby declare an oath with reference to Policy No.....effected with
Nico Life Insurance for the sum of K.....on the life of
.....born on.....at.....that

1. I am the owner of the said policy;
2. I have not ceded or pledged the said policy to anyone, either by antepenultimate contract or otherwise; and
3. The said policy has not been received by me, or
4. The said policy has been lost or mislaid and although I have made a diligent search, I have been unable to find it;
5. The said policy has to the best of my knowledge and belief been destroyed/stolen.

(DELETE AND INITIAL WHICHEVER IS NOT APPLICABLE)

My reasons for this statement

are.....
.....
.....

(ANY ALTERATIONS OR DELETIONS MUST BE INITIALED BY THE DEPONENT AND THE COMMISSIONER FOR OATHS)

.....

SIGNATURE

The Deponent has acknowledged that he /she knows and understands the contents of this Affidavit.

Signed and Sworn at.....this.....day

of.....200.... before me

SIGNATURE.....

COMMISSIONER FOR OATHS FOR.....DISTRICT