

Nico Life Insurance Company Limited NICO House, P.O. Box 3044, Blantyre, Malawi. Tel. (265) 1 822 699 Fax (265) 1 821 189 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 Noeffected with Nico Life Insurance for the sum of Kon the life of
atthat
1. I am the owner of the said policy;
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:
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 INITIALLED 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 atthisday
of20 before me
SIGNATURE

COMMISSIONER FOR OATHS FOR......DISTRICT