



NICO
Life

associated with  Sanlam group

ONE
NICO

POLICY MATURITY CLAIM FORM

1. Personal Details

Name: _____ Date: _____

Mobile No: _____ E-mail: _____

Postal Address: _____

2. Policy Details

Policy Number: _____

3. Bank Account Details

Name: _____

Acc Number: _____ Bank: _____

I would like to notify the maturity of my policy bearing the details above.

I submit with this notification the following documents:

- a. Copy of National ID
- b. Original Policy Document

Yours faithfully

Signature

NOTE: Your claim will only be processed if the above documents are submitted with the form. You will have to sign a Discharge Voucher following the submission.

Disclaimer: NICO Life will not be liable for incorrect account details entered.

Group Policies | Bancassurance Solutions | Individual Policies

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