



**STATUTORY DECLARATION AS TO LOSS OF POLICY,  
AS TO SEARCHES FOR IT, AND AS TO TITLE**

<b>Name</b>	LAST NAME	FIRST NAME	MIDDLE NAME
<b>Gender</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>	<b>Marital Status</b>	Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/>
<b>Date of Birth</b>	(DD/MM/YYYY)	<b>Nationality</b>	<b>Status</b> <input type="checkbox"/> Citizen <input type="checkbox"/> Resident
<b>National Registration #</b>	<b>Passport Number</b>	<b>Driver's Licence Number</b>	
<b>Residence Address</b>			<b>Duration</b>
<b>Telephone contact</b>	HOME	BUSINESS	CELL
<b>Email contact</b>			

In the matter of Policy No..... for \$..... on the life of  
 ..... effected with Resolution Life Assurance Company Limited.  
 I, the undersigned ..... of  
 ..... solemnly and sincerely declare:

**(TICK THE APPROPRIATE BOX)**

- That I am legally entitled to the above-mentioned Policy and to the monies assured thereby, and to give an effectual discharge for the same, by virtue of having myself effected the Policy.
- That the said Policy was, to the best of my knowledge and belief, last in my possession in the year \_\_\_\_\_ that it has since been lost, or destroyed: and that I have made diligent search for it without success.
- That the said Policy was never in my possession as having being delivered by the Agent.
- That the said Policy was not, to the best of my belief, been pledged, assigned or otherwise parted with for value or otherwise to any person or persons whomsoever who has or could have any right title or claim thereto as against or paramount to my title thereto, and I have not received notice of and am not aware of such claim.

And I make this solemn declaration conscientiously believing the same to be true and I am aware that if there is any statement in this declaration which is false in fact, or which I know to be false or do not believe to be true, I am liable to a fine and imprisonment.

Declared this                day of                ]  
 20            at                ]  
    ]

.....  
Policy Owner/ Insured

**DECLARATION OF NOTARY PUBLIC**

I, \_\_\_\_\_ of \_\_\_\_\_

NOTARY PUBLIC in and for the Island of Barbados do hereby **CERTIFY** that on the day and the date hereof personally appeared before me a

male person who identified  himself to me to be \_\_\_\_\_,  
 female  herself NAME OF POLICYHOLDER

the party named and described within this Statutory Declaration as to Loss of Policy and in my presence did duly swear and sign the said

Statutory Declaration as to Loss of Policy and as for  his free and voluntary act and deed.  
 her

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

**NOTARY PUBLIC**