



PAN AFRICA LIFE

GROUP CREDIT POLICY CLAIM NOTIFICATION

A. PARTICULARS OF LIFE ASSURED AND BENEFIT

(1) Name of the Scheme:	
(2) Member's Name (Life Assured):	
(3) Member No.	
(4) Date loan was given:	
(5) Loan amount given :	
(6) Loan Term:	
(7) Interest rate:	
(8) Date of Death:	
(9) Outstanding loan amount being claimed:	
(7) Cause of Death (Illness or Accident):	Please tick as applicable: Illness (<input type="checkbox"/>) Accident (<input type="checkbox"/>)

B: DOCUMENTS REQUIRED IN SUPPORT OF THE CLAIM

Attach the following documents and confirm by a tick against the given document	(1) Original Death Certificate	(<input type="checkbox"/>)
	(2) Original Burial Permit	(<input type="checkbox"/>)
	(3) Original Certificate of Surrender National ID of the deceased:	(<input type="checkbox"/>)
	(4) Certified copy of National ID of the deceased:	(<input type="checkbox"/>)
	(5) Police abstract if cause death is by accident	(<input type="checkbox"/>)
	(6) Account statement of repayment:	(<input type="checkbox"/>)
	(7) Loan amortisation schedule:	

C: DECLARATION

We hereby confirm that the above member was declared for cover and that the information provided is true and correct and that Pan Africa Life Assurance Limited may call for any further information they may require to enable them process the claim.

Name of person making the declaration.....

Title.....

Signature /Stamp Date.....