



**PRUDENTIAL**

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## INDIVIDUAL LIFE GENERAL CLAIM FORM

### 1. Claim type (please tick)

Maturity  Encashment  Refund  Cancellation  Surrender

### 2. Details of the Policyholder

- (i) Surname: .....
- (ii) First Names: .....
- (iii) Date of Birth: .....
- (iv) NRC or Passport No .....
- (v) Employee Number: .....
- (vi) Address: .....
- (vii) Cell. No . . . . . (0) . . . . . (H)

### 3. Policy Details

- (i) Policy Number: .....
- (ii) Sum Assured: .....
- (iii) Commencement Date ..... Maturity.....
- (iv) Term:..... Years

### 4. Bank Details

- (i) Name of the bank .....
- (ii) Account number .....
- (iii) Branch .....
- (iv) Amount Required (for Encashment). .....

### 5. Documents required

1. Original Policy Document (Cancellation, Surrender, Maturity)
2. Copy of NRC (All Claim types)
3. Fully completed and signed claim form (All Claim types)
4. Letter stating reason for claim (Cancellation, Surrender, Refund)

### 6. Declaration

I. .... declare that the foregoing particulars are true in every respect.

.....  
Signature

.....  
Date