

Downloadable Life Insurance Claim Form Example

Download our **life insurance claim form** example to simplify the submission process for beneficiaries. This easy-to-use template ensures all necessary information is accurately captured for a swift claim evaluation. Access and download the form to expedite your insurance claim today.

[Download Claim Form \(PDF\)](#)

Sample Life Insurance Claim Form

Policyholder Information

Policy Number:

Policyholder's Name:

Date of Birth:

Date of Death:

Claimant Information

Claimant's Name:

Relationship to Policyholder:

Contact Number:

Bank Details (for Payout)

Bank Name:

Account Number:

IFSC / Routing Number:

Declaration

I hereby declare that the information provided is true and correct to the best of my knowledge.

Signature:

Date:

[Submit \(Sample Only\)](#)