

Term Life Insurance Claim Application Form Sample

Download our **Term life insurance claim application form sample** to simplify the claims process. This template guides you through providing essential details for a smooth and efficient claim. Use it to ensure accuracy and speed up your insurance settlement.

1. Policy Holder Information

Policy Number:

Full Name:

Date of Birth:

Address:

Contact Number:

2. Deceased Information

Name of Deceased:

Relationship to Policy Holder:

Date of Death:

Cause of Death:

3. Claimant Information

Claimant's Full Name:

Claimant's Contact Number:

Claimant's Address:

4. Supporting Documents

- Copy of Policy Document
 - Original Death Certificate
 - Valid Photo ID (Claimant)
 - Proof of Relationship
 - Medical Records (if required)
-

5. Declaration

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

Signature:

Date:

Submit Application