

Life Insurance Death Benefit Claim Form Sample

The **life insurance death benefit claim form** sample provides a clear template for beneficiaries to request the payout after the insured's passing. This form typically requires essential details like the policy number, claimant information, and proof of death. Using a sample ensures accurate and timely submission, facilitating a smooth claims process.

Policy Information

Policy Number:

Name of Insured:

Date of Death:

Claimant Information

Claimant's Full Name:

Relationship to Insured:

Address:

Phone Number:

Email Address:

Required Documents

☐ Certified copy of Death Certificate

☐ Proof of Claimant's Identity

☐ Policy Document (if available)

Declaration

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

Signature:

Date:

Submit Claim