[Insurer name & Address] [You name & Address]

Date: [xxxxxx]

Dear Sirs

Re: The Estate of [Deceased Name] deceased

Policy number: [Policy Number]

I am the personal representative of the above-named deceased, who died on [DATE]. I have attached the death certificate for you to note and return.

We understand the deceased holds the above policy(s) with you. Please:

- 1. Provide the policies' surrender and open market valuations as of the date of death.
- 2. Please advise me of any policies the deceased may have held with you, including those in joint names.
- 3. Advise of the date of maturity/surrender if applicable.
- 4. Advise whether the policy is payable to the estate or a nominated beneficiary. If it is payable to a nominated beneficiary, please confirm the date the policy commenced or the date the policy was put into trust for the beneficiary.
- 5. Forward to me any forms you require completing to pay the claim once we have a Grant in the estate.

I thank you for your help in the above matter. You can contact me by email at [xxxxxx], or you can ring me at [xxxxx].

Yours Sincerely

[Your Name]