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With reference to your enquiry regarding life assurance policies issued in Poland by the Prudential Assurance Company Limited or Przeworność S.A., kindly complete the following questionnaire and return it to me by post, fax or e-mail at the contact details above.

If the answer to a question is not known for certain, please give the fullest information possible to the best of your belief and recollection.

Details about yourself: [Please send a copy of your passport/identity card/driver's license/or other form of official documentation]	
Mr/Mrs/Miss/Other (please specify)	
Full name	
Maiden name (if applicable)	
Name changes (including changes of spelling, if any)	
Date of birth	
Place of birth	
Citizenship	
Current address: (including postcode and country)	
Telephone No. (including country and area codes if applicable)	
Fax No. (including country and area codes if applicable)	
E-mail address	

Details of the Policy (where known):	
Type of policy (whole life, endowment, dowry etc)	
Policy No.	
Was the policy issued by Prudential or Przewoźność?	
Where was the policy purchased? (e.g. District/Town/City/Country)	
Sum assured (please state currency):	
Date of issue of policy:	
Date of maturity of policy or policy term:	
Full name of the life assured:	
Date and place of birth of the life assured/ policyholder:	
Place of residence of assured/ policyholder: (Please list all known addresses)	
Occupation	
Date and place of death of the life assured (if applicable):	
Full name of the beneficiary as stated on the original policy document:	
Relationship of the original beneficiary to the life assured (e.g. spouse, son, daughter):	
Are you in possession of any documentation relating to the policy? (if yes, please provide copies)	
Other information which may support the search (e.g. name of agent who sold the policy).	
What is your relationship to the policyholder?	

<p>Are you aware of any other living person who might be legally entitled to a share in any payment resulting from this claim? If so, please provide details if known, including name and address, and relationship to policyholder.</p>	
<p>Are you aware of any previous claims in relation to this policy? If yes, please provide details including the outcome of any such claim.</p>	
<p>Further Information:</p>	<p>Please provide any additional information which may be helpful in the space below.</p>
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Enclosures (please tick as appropriate - **Please send copies only, not originals**):

- Proof of identity
- Proof of relationship to policyholder (e.g. copies of birth/ marriage/ death certificates)
- Other documents/ statements/ information substantiating your claim

I confirm that the information I have given above is correct to the best of my knowledge and I authorise Prudential plc to record and process any information I have supplied in whatever way is necessary to investigate my claim.

..... Signature of claimant

..... Date