

Policy Encashment Request

Date

Institution Name

Institution Address

Subject **Policy / Bond No.** _____

Dear Sir / Madam

I wish to fully encash the above detailed policy / bond.

Please find enclosed:

- The original policy document (if applicable)
- Lost Policy Document (if applicable)

Please send the encashment cheque to my financial adviser _____ in Acumen & Trust Limited.

Yours sincerely

Date

Date

*Please return the completed form to your Acumen & Trust adviser at:
4 / 5 The Avenue, Beacon Court, Sandyford, Dublin 18.*