Payment on death indemnity undertaking (without Manx Probate)

Alliance Leicester INTERNATIONAL

Please fill in the form using BLOCK CAPITALS and black ink. Tick any boxes which apply.

To: Alliance & Leicester International Limited, PO Box 226, 19/21 Prospect Hill, Douglas, Isle of Man, IM1 1TA, British Isles.

1 Account holder details

Account number(s)

Full name of the deceased

Date of death D D M M Y Y Y Y

2 About you

I/We: (full names)

Address:

Postcode

Declare that I/We are: (please tick one or more boxes as appropriate)

- ☐ The Personal Representative(s) of the deceased
- ☐ Beneficially entitled to receive the funds standing to the credit of the Deceased's account(s)

I/We request Alliance & Leicester International Limited (without Manx Probate) to make payment of, or transfer, such funds to me/us. In consideration of Alliance & Leicester International Limited agreeing to such request, I/we hereby undertake to indemnify the Company against any subsequent claims arising in respect of the Deceased's account(s) and also against any subsequent losses or costs, which might be incurred in consequence of such payment or transfer being made.

	1st Personal Representative/Beneficiary	2nd Personal Representative/Beneficiary
Signed		
Date	D D M M Y Y Y Y	D D M M Y Y Y Y
Signed by Witness: (must be a Solicitor, Advocate or Notary Public)		D D M M Y Y Y Y
Full name and address of Witness	Postcode	

Call **+44 (0) 1624 641888**, fax **+44 (0) 1624 663577** Or click **alil.co.im**

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