# MISSING BENEFICIARY/ MISSING WILL INDEMNITY PROPOSAL FORM

##  Name of Proposer in full

Administrator/Executor/Trustee

**Address**

**Name(s) and address(es) of any other personal representatives of the Deceased**

**Full Name of Deceased, Deceased’s Date of Birth and Date of Death**

**Deceased’s Marital Status**

**Relationship of Proposer to the Deceased**

**A copy of any Will or Trust Deed relevant to the estate must be supplied. Please tick relevant box.**

**Will enclosed Intestacy**

**Full value of the estate for distribution**

£

**Limit of Indemnity required**

£

**If less than full value - Basis of calculation**

**Number of Missing Beneficiaries**

**A detailed Family Tree showing the full names and dates of births, death and marriages of all beneficiaries should be enclosed.**

**Family Tree enclosed**

**Details of Missing Beneficiaries (please supply as much information as possible).**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Full name and last known address** | **Date of Birth** | **Marital Status** | **Relationship to the deceased** | **Names and ages of any children** | **Last known trade or profession** | **Full details of date and circumstances last seen or heard of** |
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**What enquiries have been made to trace the missing beneficiaries? Please supply copies of any relevant genealogist reports correspondence and any press notices/advertisements**

**Please supply details of any outstanding enquiries**

**If cover is required in respect of a valid will of the deceased being discovered after the distribution of the Estate, please complete the following**

**a. Why it is believed the deceased may have left a will?**

**b. Are its possible contents known? Please provide full details.**

**c. Please provide full details of all enquiries made to locate a will of the Deceased.**

**d. Was the deceased involved with any charitable organisations or making any regular payments to a charity?**

**e. Who cleared the deceased’s property?**

**f. Was any document relating to a will found? If so please provide full details.**

### *DECLARATION*

I/We declare that the statements made by me/us are true and complete to the best of my/our knowledge and belief as the Proposer;

I/We agree that this Proposal shall be incorporated in the contract between the Proposer and the Insurer;

I/We undertake to inform Litigation Protection of any material alteration to these facts occurring before completion of the contract of insurance

Signature Date

Signature Date

The questions and information which we require you to provide on this form, and any other questions or information which we specifically ask or request, relate to facts considered material to underwriting the insurance. Failure to do answer them fully and truthfully may invalidate your insurance. If in response to these questions you are in any doubt as to whether a fact is material, you should disclose it.