

Policy Number: \_\_\_\_\_

Policyholders Name: .....

Address line 1: .....

Address line 2: .....

Address line 3: .....

Address line 4: .....

Postcode: .....

Contact Telephone No: .....

Email Address: .....

\*\*\*\*\* **LOST CERTIFICATE DECLARATION** \*\*\*\*\*

I, \_\_\_\_\_, of the above address, wish to confirm I have lost/mislaidd my Certificate of Insurance issued to me in respect of vehicle registration,  
\_\_\_\_\_

I hereby undertake to return the Certificate of Insurance immediately my Insurance Adviser, Brian McGurgan Insurance, should it come into my possession in the future.

I Do / Do Not require a duplicate Certificate to be issued to me.  
(Please note £10.00 charge applies to duplicate Certificates)

Signed by..... Print Name.....

Dated this..... Day of ....., in the year 20.....