

Suite 2, Colonial Hill Plaza  
#72 University Drive  
P.O. Box GT-2174  
Nassau, Bahamas



Don't take a chance.  
Put it in our hands.

## REQUEST FORM

**Insured:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Loss Payee:** \_\_\_\_\_

**Policy No.:** \_\_\_\_\_

**Effective Period:** From \_\_\_\_\_ To \_\_\_\_\_

- Annual                       Additional  
 Renewal                     Refund

**Premium:** \_\_\_\_\_

**Transaction Description:**

- New Policy     Cancel Policy  
 Renewal Policy  Reissue Policy  
 Endorsement  Reinstate Policy

**Amendments/Special Note:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Client's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Underwriter Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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