

DECLARATION OF LOSS OF POLICY

Policy Number	Life Insured
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For the purpose of establishing the loss or destruction of the above numbered policy and inducing The Manufacturers Life Insurance Company (Philippines), Inc. (hereinafter called the Company) to issue a duplicate policy, the undersigned hereby makes the following declarations:

1. The policy was lost/destroyed while in possession of _____
_____ and or about _____
under the following circumstances:

2. The policy has not been assigned, transferred or pledged for any purpose to any other person and no person other than the undersigned has any claim against the policy except:

3. The undersigned have made diligent search and inquiry and the policy cannot be found, and it is not in the possession or control of any other person to the best of the knowledge of the undersigned.

4. The undersigned request that a duplicate policy be issued and in consideration thereof agree (1) that the issue of the duplicate policy shall in no way alter or affect the rights and liabilities arising out of the original policy, (2) to return the duplicate policy immediately to the Company if the original is found, (3) to indemnify the Company against any loss that it may sustain as a result of its issuing a duplicate policy.

Dated at _____ this _____ day of _____

Witness Signature of Life Insured
Over Printed Name

Witness Signature of Beneficiary
Over Printed Name

Witness Signature of Owner
Over Printed Name

Subscribed and sworn to before me, this _____ day of _____,
_____ affiant exhibiting to the Community Tax Certificate
No. _____ issued on _____, _____ at _____.

Doc. No. _____;
Page No. _____;
Book No. _____;
Series of _____