





## Section 7: Declaration and Authorisation

I confirm I have been informed about the Irish Life Data Privacy Notice and where to find this. I have also notified those whose personal details I have provided to you with details of where they can find the Irish Life Data Privacy Notice.

I declare that the information I have given above is correct. I authorise Irish Life to proceed to make the payment(s) due in respect of this claim, subject to admission of claim.

Please sign  
and date

Name

Position

Trustee/Appointed Broker Signature

Date