

## Declaration Under Regulation 6(3) of the Life Assurance (Provision of Information) Regulations, 2001

### WARNING

If you propose to take out this policy in complete or partial replacement of an existing policy, please take special care to satisfy yourself that this policy meets your needs. In particular, please make sure that you are aware of the financial consequences of replacing your existing policy. If you are in doubt, please contact laya life immediately.

### Declaration of Insurance Intermediary

Laya Life Policy Number:

I hereby declare that in accordance with Regulation 6(1) of the Life Assurance (Provision of Information) Regulations, 2001, \_\_\_\_\_ (the member) has been provided with the information specified in Schedule 1 to those Regulations and that I have advised the client as to the financial consequences of replacing an existing policy by cancellation or reduction, and of possible financial loss as a result of such replacement.

Signature:

Date: Day  Month  Year

### Declaration of Consumer

I \_\_\_\_\_ confirm that I have received in writing the information specified in the above declaration

Signature:

Name of member:

Date: Day  Month  Year