Allianz

Application for Replacement of Lost, Destroyed or Defaced Certificate of Insurance

Road Traffic (N.I.) Order 1981
Motor Vehicles (Third Party Risks) Regulations (N.I.) 1994

Policyholder

Name:
Policy Number:
Address:

Postcode:

Declaration

In pursuance of Road Traffic (N.I.) Order 1981 and Motor Vehicles (Third Party Risks) Regulations (N.I.) 1944. I, being the person to whom the Certificate of Insurance described below was issued, declare that the said Certificate has been lost/destroyed under the following circumstances:-

Signature of Insured: ✗ Date: ✗ / /

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