



**Name and Address**

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**Policy Number:** \_\_\_\_\_

**Client Reference:** \_\_\_\_\_

**LOST CERTIFICATE DECLARATION**

**Reason for a LCD Request** \_\_\_\_\_

**Instructions to complete this form**

- If your Certificate of Insurance has been lost or destroyed, please complete, sign and date the declaration below.
- Please return this form by post or fax to enable your request to be fulfilled.

**ROAD TRAFFIC ACT  
1988.**

**Statutory Declaration Re: Lost or Destroyed Certificates of Motor Insurance**

**Policyholder's Name:** (I) \_\_\_\_\_

**Insert Full Address:** (of) \_\_\_\_\_

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**do solemnly and sincerely declare**

that the Certificate of Motor Insurance issued by Quinn-*direct* Insurance in respect of Policy No.

\_\_\_\_\_ for the period from \_\_\_\_\_ to \_\_\_\_\_ have been lost, mislaid or destroyed.

Signature: \_\_\_\_\_

Declared at (time and date): \_\_\_\_\_

Witnessed by: \_\_\_\_\_

**Please return to: 3 Lawnakilla Way, Carran Business Park, Enniskillen, Co. Fermanagh, BT74 4RZ.**

QUINN-Insurance Limited (Under Administration), trading as QUINN-*direct* is authorised by the Central Bank of Ireland and subject to limited regulation by the Financial Services Authority. Details about the extent of our regulation by the Financial Services Authority are available from us on request. Liberty Mutual Direct Insurance Company Limited services the United Kingdom business of QUINN-Insurance Limited (Under Administration).