



Death Claim Form - Child

NOTE: A certified copy is a copy of the original which has been stamped as a true copy by your solicitor, any bank or financial institution or Garda station.

The plan owner should complete this form, attach any relevant documents and return to the address below.

To process this claim we also need the following:

- Original or certified copy of the death certificate
- Original or certified copy of the birth certificate

We will be available to help and advise you during this claim. Our contact details are as follows:

Protection Claims Team

Irish Life
57 Temple Road
Blackrock
Co. Dublin

Email: cli.techclaims@irishlife.ie
Tel: 1850 200 563
(Lines open 9am – 5pm Monday to Friday)
Fax: 01 209 1386

In the interest of customer service we will record and monitor calls.

Section A – Plan Details

Plan Number(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name(s) of plan owner(s)	<input type="text"/>		
Childs name	<input type="text"/>		
Child's date of birth	<input type="text"/>	Child's date of death	<input type="text"/>
Cause of death	<input type="text"/>		

Section B – To be completed by the person making the claim

I am legally entitled to claim the amount you will pay under the plan shown above.

Please sign and date

Signature First Life

Please sign and date

Signature Second Life (if applicable)

Date

Address

Phone Number(s) Home Work Mobile

Email

Any specific instructions

Any additional information in relation to us contacting you on the claim in general.

Thank you